

Milwaukee County



People with Chronic Conditions

Provided by the Wisconsin Information for State Health Policy Program, a program funded by the Division of Health and the Robert Wood Johnson Foundation.

Comments and suggestions on improving the profiles may be addressed to:

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September 1996

FOREWORD

Community Health Profiles: People with Chronic Conditions is the third in a series of three subject-specific profiles. These profiles were developed to provide information that will contribute to the appropriate use of long-term care services for people with chronic conditions. The first profile in the series is about pregnant women and infants; the second is about children.

The profiles evolved from a series of discussions, begun in 1992, between decision-makers in Wisconsin who met to identify key health policy issues for which information was needed. The Wisconsin Information for State Health Policy Program (InfoSHPP), which seeks to improve the availability and usefulness of health information for policy-makers in the state, was an outgrowth of those discussions.

During the early phases of InfoSHPP, local communities were recognized as the primary arenas for implementing an effective long-term care system. In response, profiles to address the need for local information were developed for 89 distinct geographical areas of the state:

- each Wisconsin county;
- each of Wisconsin's five largest cities (Kenosha, Madison, Milwaukee, Racine, and Green Bay);
- a selected group of zip codes in the city of Milwaukee;
- the five Division of Health regions; and for the state as a whole.

This profile includes information about chronic conditions (defined by selected diagnoses) which program and policy decision-makers identified as high priority. These diagnoses and the associated International Classification of Disease--Ninth Revision disease codes are listed in the Technical Notes.

Community Health Profiles: People with Chronic Conditions makes a special contribution to local health information by providing:

- a focus on the specific topic of chronic health conditions;
- information in a user-friendly format;
- information from a variety of data sources, including both population-based and program participant information;
- a narrative highlighting related *statewide* information for each table and graph;
- graphs for comparable statewide, regional and local information (statewide and regional information is shown, even when numbers are too small to present for local areas);
- comparisons between actual and expected values, based on statewide rates, for selected health measures.

Many people contributed their time and ideas through a collaborative planning process to produce these profiles. Special acknowledgment goes to the chronic conditions work group formed in connection with the Information for State Health Policy Program; the Chronic Disease Section, Bureau of Public Health, and the Bureau of Health Care Financing, Division of Health; the Bureau on Aging and the Bureau of Long-Term Support, Division of Supportive Living; the Bureau of Management and Operations, Division of Children and Family Services; the Demographic Services Center, Department of Administration; and the Office of Health Care Information, Office of the Commissioner of Insurance.

The profiles were prepared in the Center for Health Statistics. Bernie Tennis was lead research analyst for the profiles; he had primary responsibility for the content, gathering and summarizing of the data. Angela Bethel performed technical production of the profiles, including creating the tables and graphics and importing the data. Patricia Nametz provided editing and review of the profiles. Patricia Guhleman, InfoSHPP Program Coordinator, provided consultation in all phases of production. Chris Miller proofread the final reports.

The following individuals provided data and expertise: Robert Adler for data from the U.S. Census; Eleanor Cautley and Fred Krantz for data from the Family Health Survey and Behavioral Risk Factor Survey; Laura Owens for data from the hospital inpatient files; Yiwu Zhang for Home Health Survey data; Victor Jesudason for Nursing Home Survey data; Richard Betz for Community Options Program (COP), Medicaid (MA) Waiver, and Community-Based Residential Facility (CBRF) data; Laura Stevenson-Vine for Cancer Reporting System data; Ed Seiser for CBRF data; and Dan Spencer for Medicaid data.

Your comments and suggestions on improving the profiles are appreciated. Please direct them to Bernie Tennis (608-267-9090 or tennib@dhfs.state.wi.us) or Patricia Guhleman (608-267-5221 or guhlepa@dhfs.state.wi.us) at the Center for Health Statistics. On the Internet, go to: <http://www.dhfs.state.wi.us/> for instructions about accessing the profiles.

Requests for additional profiles should be addressed to:

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DEMOGRAPHICS

Table 1. Population by Age, 1990 and Selected Years

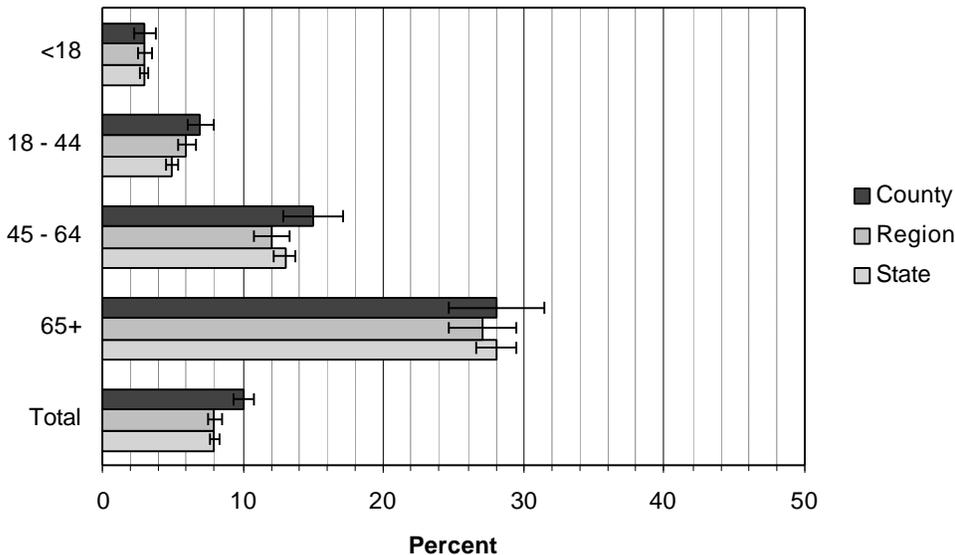
Age	1990	% Female	1994	2000	2010
<18	247,214	49%	266,700	272,167	267,463
18-34	281,703	52	242,340	236,458	248,279
35-44	135,118	51	159,590	165,354	134,801
45-54	83,787	53	106,530	131,498	163,070
55-64	81,190	54	69,980	76,450	122,578
65-74	71,924	58	64,620	62,145	60,201
75-84	43,801	66	44,210	45,116	39,716
85+	14,538	75	15,630	17,679	19,453
Total	959,275	53%	969,600	1,006,867	1,055,561

Source: 1990 data are from the U.S. Census of Population and Housing, Modified Age-Race-Sex (MARS) file. 1994 estimates are from the Wisconsin Center for Health Statistics. Projections for 2000 and 2010 are from the Demographic Services Center, Wisconsin Department of Administration.

Statewide, the number of people age 55 and over is expected to increase by one-third during the 20-year interval from 1990 to 2010.

HEALTH STATUS

Figure 1. Percent of Persons with Fair or Poor Health

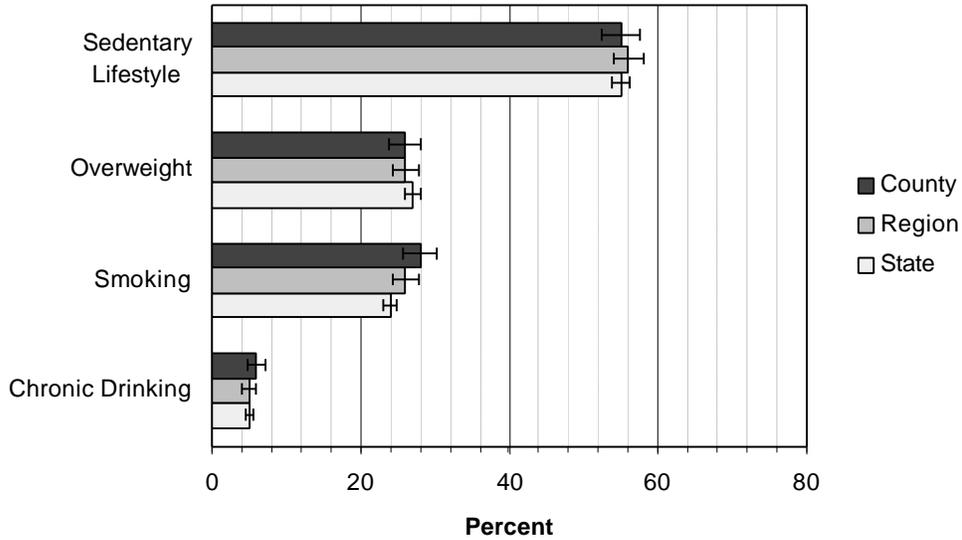


Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

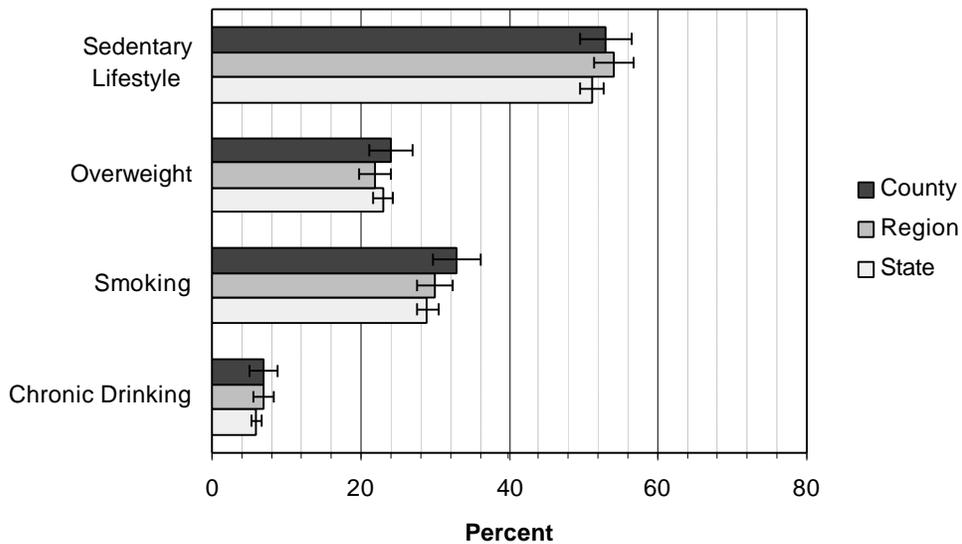
Older people are more likely than younger people to perceive their health as fair or poor. Statewide, about 28 percent of older people (age 65 and over) perceive their health as either fair or poor, compared with about 13 percent of people age 45-64.

Figure 2a. Percent of Persons with Selected Behavioral Risks, Ages 18 and Older



About half of Wisconsin adults engage in little or no leisure-time physical activity (sedentary lifestyle), making this the most prevalent behavioral risk to health.

Figure 2b. Percent of Persons with Selected Behavioral Risks, Ages 18-44

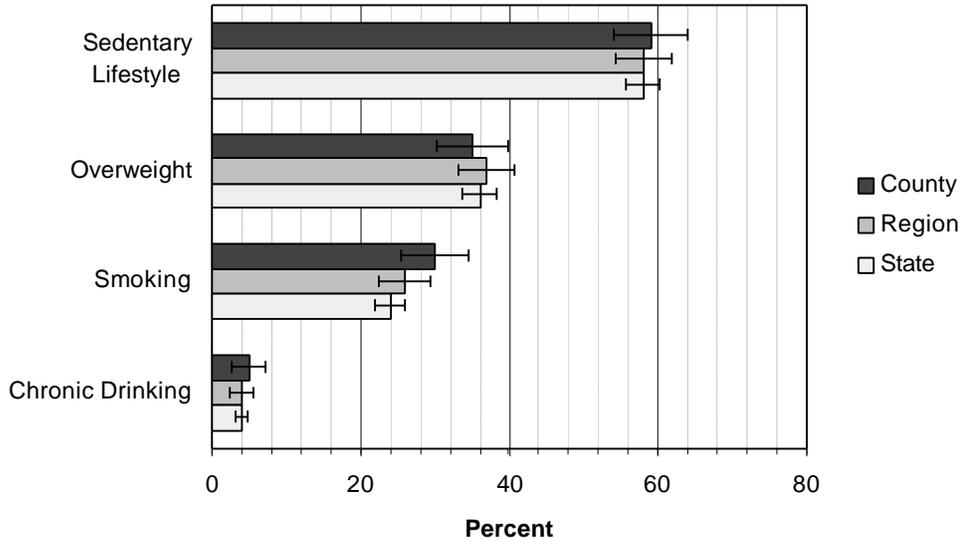


For people ages 18-44, sedentary lifestyle ranks first in statewide prevalence of behavioral risks to health; smoking cigarettes constitutes the second most common behavioral risk.

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

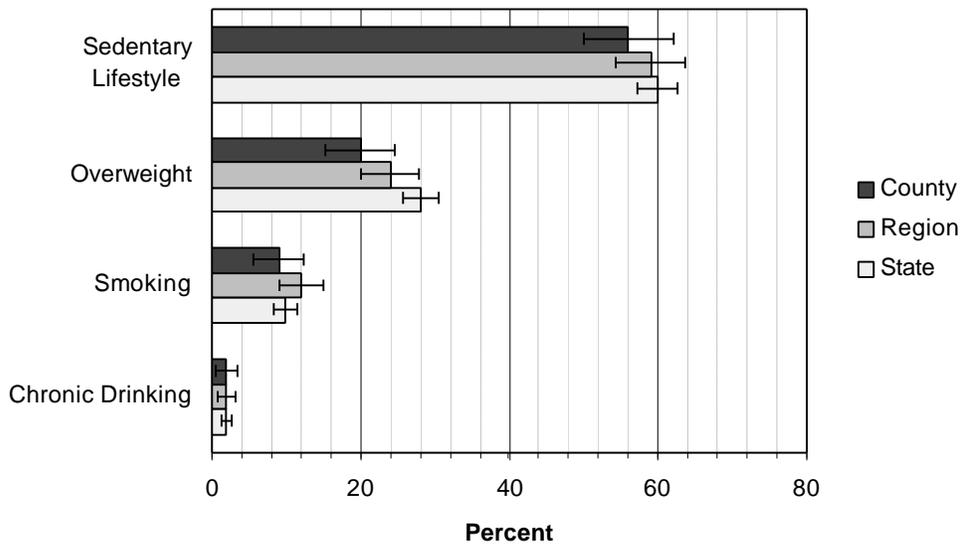
Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). County estimates based on fewer than 100 interviews are not shown.

Figure 2c. Percent of Persons with Selected Behavioral Risks, Ages 45-64



Among middle-aged people (ages 45-64), being overweight represents the second leading behavioral risk (about 36 percent statewide), and smoking ranks third (24 percent).

Figure 2d. Percent of Persons with Selected Behavioral Risks, Ages 65 and Older



Statewide, sedentary lifestyle and being overweight represent the most prevalent behavioral risks to people age 65 and over (about 60 percent and 28 percent, respectively).

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). County estimates based on fewer than 100 interviews are not shown.

Table 2a. Percent of Persons Reported to Have Selected Chronic Conditions, All Ages

Chronic Condition	County		Region		State	
	Percent	(+/-)	Percent	Percent	Percent	Percent
Cancer	2	(0)	3	3	3	3
Diabetes	3	(0)	3	3	3	3
Hypertension	12	(1)	11	11	11	11
Coronary Heart Disease	4	(0)	4	4	4	4
Heart Attack	2	(0)	2	2	2	2
Stroke	1	(0)	1	1	1	1
Asthma	9	(1)	9	9	8	8
Emphysema or Chronic Bronchitis	3	(0)	3	3	3	3
Arthritis	12	(1)	11	11	11	11
Any of the above	31	(1)	30	30	30	30

In Wisconsin, about 30 percent of all people report at least one chronic health condition, with arthritis and hypertension (high blood pressure) being the most frequently named conditions.

Table 2b. Percent of Persons Reported to Have Selected Chronic Conditions, by Age Groups

Chronic Condition	<65				65+				
	County		Region		County		Region		State
	%	(+/-)	%	%	%	(+/-)	%	%	%
Cancer	1	(0)	2	2	11	(2)	12	13	13
Diabetes	2	(0)	2	2	11	(2)	10	11	11
Hypertension	9	(1)	8	8	44	(4)	43	41	41
Coronary Heart Disease	2	(0)	2	2	21	(3)	23	21	21
Heart Attack	1	(0)	1	1	11	(2)	10	10	10
Stroke	0	(0)	0	0	7	(2)	6	6	6
Asthma	10	(1)	9	8	7	(2)	7	8	8
Emphysema or Chronic Bronchitis	3	(0)	2	2	7	(2)	7	7	7
Arthritis	8	(1)	8	7	46	(4)	44	45	45
Any of the above	26	(1)	25	24	77	(3)	77	78	78

Statewide, about one-fourth of all people under age 65 report at least one chronic health condition, compared with more than three-fourths of all people age 65 and over.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is based on persons who have ever been told by a doctor they have the listed condition. 95% confidence intervals are shown for county estimates only, because they are based on smaller sample sizes than the estimates for the regions and the state (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 3. Actual and Expected New Cancer Cases by Site

Primary Site	Annual Average 1989-1993	1994		Significant Difference
		Actual	Expected	
Females				
Breast	795	777	666	**
Colorectal	351	312	285	
Lung, Trachea & Bronchus	274	288	231	**
Cervical	198	170	178	
Other Sites	1,013	1,000	892	**
All Sites	2,631	2,547	2,252	**
Males				
Colorectal	344	299	269	*
Lung, Trachea & Bronchus	422	449	311	**
Prostate	677	678	606	**
Other Sites	1,024	1,047	842	**
All Sites	2,467	2,473	2,028	**
Total				
Colorectal	695	611	554	**
Lung, Trachea & Bronchus	696	737	542	**
Other Sites	3,707	3,672	3,184	**
All Sites	5,098	5,020	4,280	**

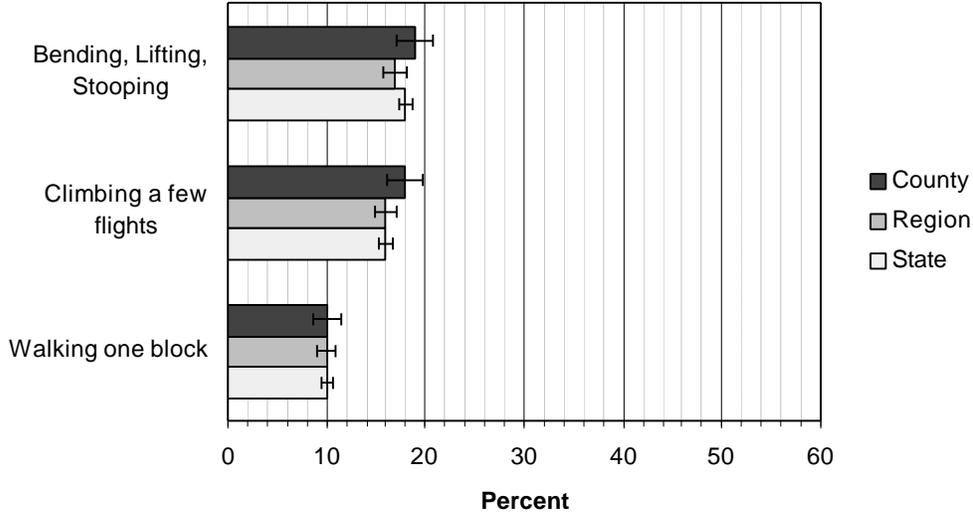
Source: Wisconsin Cancer Reporting System, Center for Health Statistics.

Note: The "expected" number of new cases for 1994 was calculated based on statewide cancer incidence rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of new cases in 1994 and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Statewide, breast cancer accounted for about one-fourth of newly reported cancers among Wisconsin women in 1994. Prostate cancer represented about 30 percent of reported cancer incidence among men.

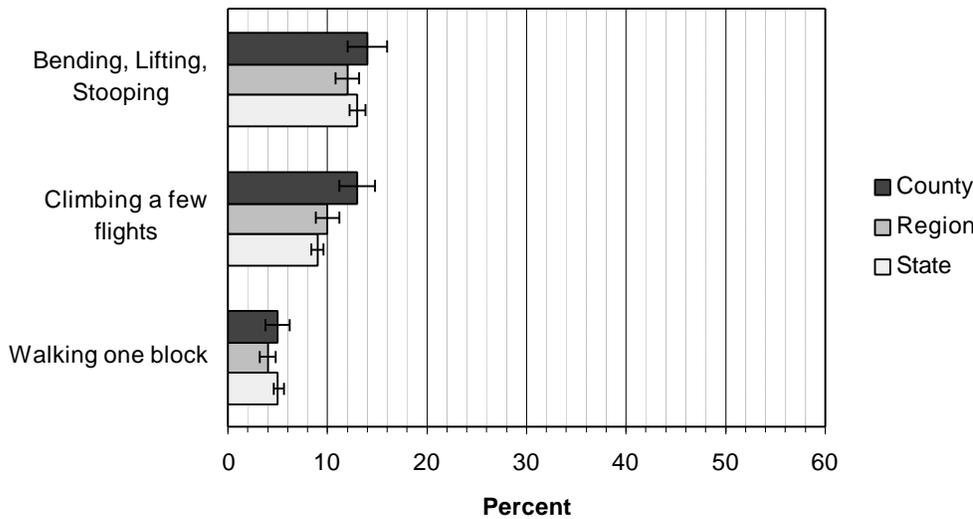
Lung cancer and colorectal cancer each accounted for 13 percent of total cancer incidence in 1994.

Figure 3a. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 45 and Older



Among all people age 45 and over in Wisconsin, a health condition limits physical bending, lifting or stooping for about 18 percent; climbing two flights of stairs for about 16 percent; and walking one block for about 10 percent.

Figure 3b. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Ages 45-64

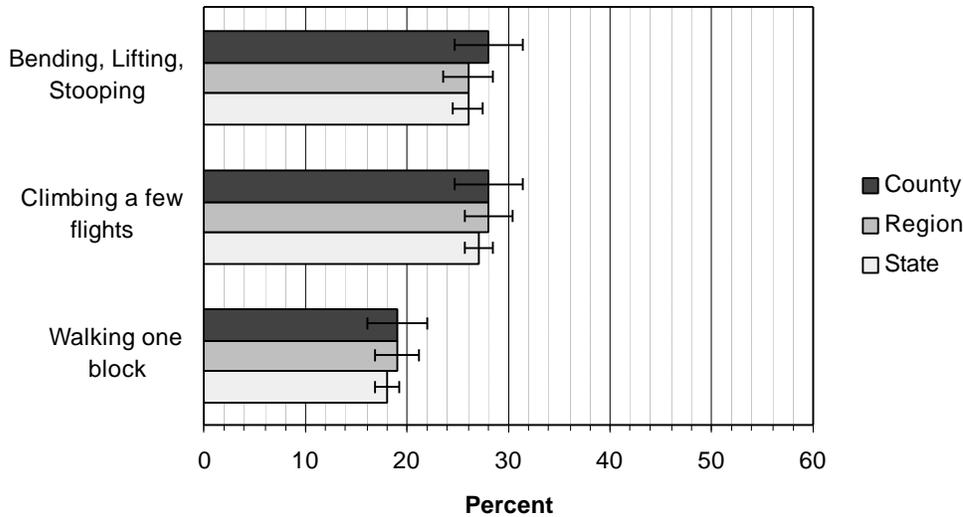


Among people ages 45-64, about 13 percent statewide indicate a limitation in bending, lifting or stooping due to a health condition.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 3c. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 65 and Older



Statewide, more than one-fourth of people age 65 and over face physical limitations in climbing stairs (about 27 percent) or bending, lifting, or stooping (about 26 percent).

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

USE OF SERVICES

Table 4. Number of Home Health Recipients with Chronic Conditions, 1994

Age	Develop. or Phys. Disability	Mental Illness	CNS Disorder	Other Chronic Condition
<55	257	280	168	972
55-64	42	59	40	687
65-74	23	59	56	1,299
75+	15	154	105	2,147
Total	337	552	369	5,105

Source: Wisconsin Annual Survey of Home Health Agencies, Center for Health Statistics.

Note: This table provides unduplicated counts for 1994 of home health agency patients with chronic conditions; that is, patients whose primary diagnosis was a developmental or physical disability; a mental illness; a central nervous system (CNS) disorder, such as multiple sclerosis; or some other chronic condition. See Technical Notes for more detail about these categories. Counts of home health agency patients in various diagnostic categories are by *location of the agency*.

A chronic condition represented the primary diagnosis for about 29,000 clients of Wisconsin home health agencies in 1994.

Table 5. Number of Residents of Skilled Nursing Facilities (SNFs) on December 31, 1994

Age	Develop. Disability	Mental Illness	Physical Disability	All Others
<65	60	195	31	412
65-74	41	393	46	719
75-84	14	784	58	1,699
85+	7	818	56	2,839
Total	122	2,190	191	5,669

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: SNFs are nursing homes licensed to provide medical care needed to restore residents to their rehabilitation potential. This table reflects an unduplicated count of all SNF residents; the count is by *location of the facility*. All SNF residents (regardless of diagnosis) are included in this table. See Technical Notes for detail about the diagnostic categories.

In 1994, about half of all residents of Wisconsin skilled nursing facilities (SNFs) were age 85 or older.

Table 6. Number of Persons Enrolled in the Community Options Program (COP) and Medicaid Waiver Programs in 1994

Age	Frail Elderly	Develop. Disability	Mental Illness	Physical Disability	Other
<18	0	7	2	0	1
18-44	0	479	185	137	0
45-54	0	99	144	61	3
55-64	0	53	262	47	1
65-74	590	0	0	0	0
75-84	595	0	0	0	0
85+	407	0	0	0	0
Total	1,592	638	593	245	5

Source: Wisconsin Human Services Reporting System.

Note: This table provides unduplicated counts of all persons enrolled in the COP and Medicaid waiver programs (CIP2, COP-W, CIP1A, CIP1B, CSLA), which are state-supervised and county-administered programs that provide community-based services to nursing-home-eligible persons. The count in this table reflects *county of residence*. See Technical Notes for more detail about the diagnostic categories.

Statewide, about 18,000 people were enrolled in the Community Options Program or Medicaid waiver programs in 1994; about half the enrollees were under age 65.

Table 7. Number of Publicly-Funded Residents of Community-Based Residential Facilities (CBRFs) in 1994

Age	Develop. Disability	Mental Illness	Physical Disability	AODA	Other
18-44					
45-64					
65-74					
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: A CBRF is a home or facility where three or more adults live and receive supportive services in daily living, care, treatment, or protective services beyond room and board; CBRF services may not include nursing care on a permanent basis. This table provides unduplicated counts of persons whose residence in a CBRF in 1994 was publicly funded. (No counts of private-pay CBRF residents are available.) The count is by *resident's county of origin*. Fifty-two residents statewide were reported to be under 18 years of age, and were not included in this table. See Technical Notes for more detail about the resident categories.

Statewide, mental illness constituted the most prevalent primary diagnosis among residents with public funding in community-based residential facilities in 1994.

Table 8. Number of Residents of Facilities for the Developmentally Disabled (FDDs) on December 31, Selected Years

	1990	1992	1994
Total	1,103	990	903

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: FDDs are nursing homes licensed to provide active treatment and services to residents who are developmentally disabled, primarily due to mental retardation or cerebral palsy. This table reflects an unduplicated count of all FDD residents each year on December 31; the count is by *resident's county of origin*.

Statewide, there were about 3,400 residents in facilities for the developmentally disabled in 1994, nearly 500 fewer than in 1990.

Table 9. Number of Hospitalizations for Selected Chronic Conditions, by Age, 1994

Chronic Conditions	<18	18-44	45-64	65-74	75+
AIDS/HIV	4	36	5	0	0
Cancer					
Breast	0	68	240	183	127
Colorectal	0	22	120	144	218
Lung, Trachea, & Bronchus	0	15	201	217	125
Cervical	0	37	29	8	4
Prostate	2	0	117	131	89
Other Cancers	102	1,036	1,414	1,000	942
Diabetes	102	560	578	328	294
Mental Illness					
Affective Disorders	459	2,181	682	293	315
Schizophrenias/Psychoses	20	1,121	340	88	82
Anxiety/Char Dis Inc Deprsn	213	301	104	63	99
Dementias	0	6	38	96	346
Alcohol and Other Drug Abuse	97	3,973	471	64	25
Other Mental Illness	229	80	3	0	0
Paralysis & Cerebral Palsy	3	16	12	18	16
Hypertension	4	76	64	47	44
Congestive Heart Failure	6	182	861	1,012	2,021
Coronary Heart Disease	0	350	2,287	2,109	1,918
Stroke	11	155	666	943	1,616
Asthma	1,095	786	306	138	143
Other Chronic Lung Disease	17	124	416	466	500
Liver Disease/Cirrhosis	2	112	123	56	26
Other Chronic Condition	280	1,716	1,691	1,409	1,435
Total Hospitalizations for Chronic Conditions	2,646	12,953	10,768	8,813	10,385
Total Hospitalizations	28,051	50,193	24,380	18,894	25,358

Statewide, a chronic condition constituted the primary diagnosis for about 30 percent of the approximately 602,000 total hospitalizations in 1994.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions.

Corrections to Mental Illness categories made January, 1998

Table 10. Actual and Expected Hospitalizations for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		Significant Difference
		Actual	Expected	
AIDS/HIV	87	45	22	**
Cancer				
Breast	675	618	506	**
Colorectal	564	504	484	
Lung, Trachea, & Bronchus	553	558	352	**
Cervical	72	78	50	**
Prostate	461	339	350	
Other Cancers	4,902	4,494	3,467	**
Diabetes	1,682	1,862	1,189	**
Mental Illness				
Affective Disorders	3,250	3,930	2,530	**
Schizophrenias/Psychoses	1,503	1,651	977	**
Anxiety/Char Dis Inc Deprsn	949	780	683	**
Dementias	429	486	350	**
Alcohol and Other Drug Abuse	4,033	4,630	1,963	**
Other Mental Illness	354	312	298	
Paralysis & Cerebral Palsy	74	65	37	**
Hypertension	232	235	149	**
Congestive Heart Failure	3,889	4,082	2,823	**
Coronary Heart Disease	7,274	6,664	5,531	**
Stroke	3,273	3,391	2,651	**
Asthma	2,488	2,468	1,177	**
Other Chronic Lung Disease	1,034	1,523	1,178	**
Liver Disease/Cirrhosis	319	319	197	**
Other Chronic Conditions	7,151	6,531	6,037	**
Total Hospitalizations for Chronic Conditions	45,248	45,565	33,001	**

Coronary heart disease, congestive heart failure, stroke, cancer and chronic lung disease accounted for more than half of all 1994 Wisconsin hospitalizations for which a chronic condition constituted the primary diagnosis.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions. The "expected" number of hospitalizations was calculated based on statewide hospitalization rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of hospitalizations and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Corrections to Mental Illness categories made January, 1998

Table 11. Hospitalizations for a Chronic Condition with a Secondary Diagnosis of Diabetes, by Principal Diagnosis, 1994

Principal Diagnosis	<55	55-74	75+	Total
Mental Illness	196	147	101	444
Coronary Heart Disease	263	895	363	1,521
Stroke	75	377	266	718
Chronic Lung Disease	101	162	89	352
Other Chronic Condition	521	1,620	834	2,975
Total	1,156	3,201	1,653	6,010

Source: Office of Health Care Information, hospital inpatient database.

Note: This table presents only those hospitalizations with a secondary diagnosis of diabetes for which the principal diagnosis was one of the selected chronic conditions examined. Diabetes is also associated with hospitalizations for complications not shown here, such as limb amputations and kidney failure.

About 14 percent of all hospitalizations for a chronic condition included a secondary diagnosis of diabetes.

Table 12. Medicaid-Reimbursed Health Services for People with Chronic Conditions, 1994

Services	Number of Recipients	Payment (in thousands)
Hospitalizations - Inpatient	11,633	\$75,426
Hospitalizations- Outpatient	23,989	18,816
Nursing Home	8,768	182,317
Physician	38,810	20,191
Pharmacy	38,339	35,489
Home Care	2,857	21,264
Mental Health	9,210	5,174
Therapies	3,479	5,137
Other	40,151	40,918
Total	43,502	\$404,731

Source: Medicaid Claims, Bureau of Health Care Financing.

Note: The counts in this table do not include any services provided by an HMO. "Therapies" include physical therapy, occupational therapy, speech and hearing therapy, group therapy, and comprehensive outpatient therapy provided by rehabilitation agencies. "Other" includes emergency room, durable medical equipment, lab and X-ray, dental, transportation, HealthCheck, and all other Medicaid services. See Technical Notes for list of chronic conditions and their ICD-9-CM codes.

Statewide, Medicaid paid about \$1.6 billion for services to people with chronic health conditions in 1994.

MORTALITY

Table 13. Mortality Attributed to Selected Chronic Conditions, 1994

Chronic Condition	<45	45-64	65-74	75+
HIV/AIDS	77	16	0	0
Cancer				
Breast	11	53	40	52
Colorectal	8	46	57	113
Lung, Trachea, & Bronchus	6	161	185	190
Cervical	4	9	6	1
Prostate	0	15	35	108
Diabetes	12	48	67	99
Congestive Heart Failure	1	3	16	119
Coronary Heart Disease	37	263	436	1,401
Stroke	17	63	104	513
Chronic Lung Disease	6	42	102	244
Liver Disease/Cirrhosis	16	46	17	16
Total (Chronic Conditions)	195	765	1,065	2,856
Total (All Deaths)	917	1,424	1,807	5,016

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death. Several conditions may be cited on the death certificate; one is selected using criteria established by the National Center for Health Statistics as the "underlying cause of death," that is, "the disease or injury which initiated the chain of events leading directly or indirectly to death." See Technical Notes for ICD-9-CM codes.

Table 14. Actual and Expected Mortality for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
HIV/AIDS	79	93	39	**
Cancer				
Breast	205	156	169	
Colorectal	235	224	206	
Lung, Trachea, & Bronchus	536	542	436	**
Cervical	19	20	14	
Prostate	135	158	137	*
Diabetes	221	226	197	*
Congestive Heart Failure	169	139	208	**
Coronary Heart Disease	2,346	2,137	1,923	**
Stroke	667	697	648	*
Chronic Lung Disease	369	394	378	
Liver Disease/Cirrhosis	98	95	60	**
Total	5,079	4,881	4,415	**

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death (see note, Table 13). The "expected" number of deaths was based on statewide mortality rates by age and sex (see Technical Notes). The last column indicates whether there was a statistically significant difference between the expected number of deaths and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

In 1994, chronic conditions accounted for about half (24,390) of all Wisconsin deaths.

Statewide, coronary heart disease represented the leading cause of death due to a chronic health condition in 1994.

City of Milwaukee

DEMOGRAPHICS

Table 1. Population by Age, 1990 and Selected Years

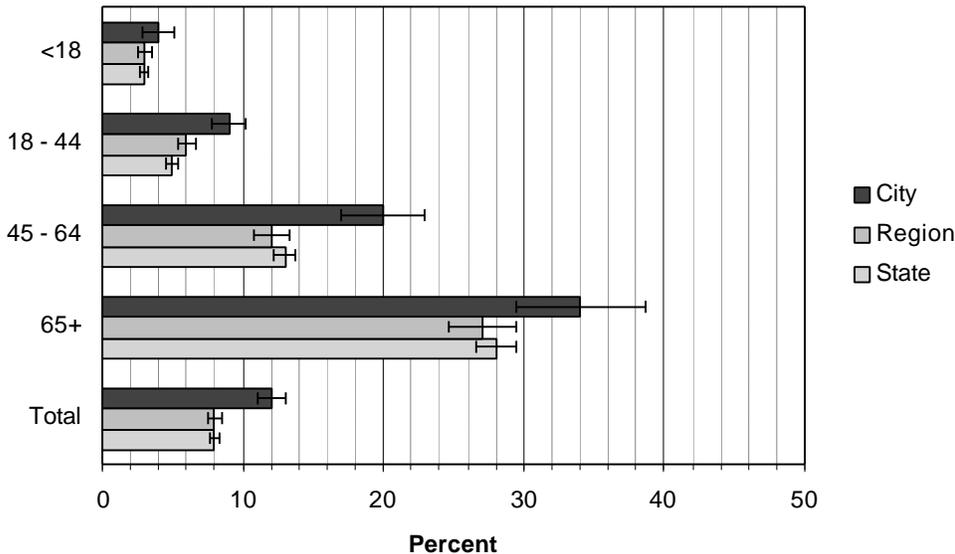
Age	1990	% Female	1994	2000	2010
<18	172,893	49%	185,559		
18-34	196,053	52	167,790		
35-44	83,842	52	98,518		
45-54	49,282	54	62,337	Projections are not available below the county level.	
55-64	48,126	54	41,268		
65-74	42,924	58	38,367		
75-84	26,278	66	26,387		
85+	8,690	74	9,297		
Total	628,088	53%	629,522	650,627	674,743

Source: 1990 data are from the U.S. Census of Population and Housing, Modified Age-Race-Sex (MARS) file. 1994 estimates are from the Wisconsin Center for Health Statistics. Projections for 2000 and 2010 are from the Demographic Services Center, Wisconsin Department of Administration.

Statewide, the number of people age 55 and over is expected to increase by one-third during the 20-year interval from 1990 to 2010.

HEALTH STATUS

Figure 1. Percent of Persons with Fair or Poor Health

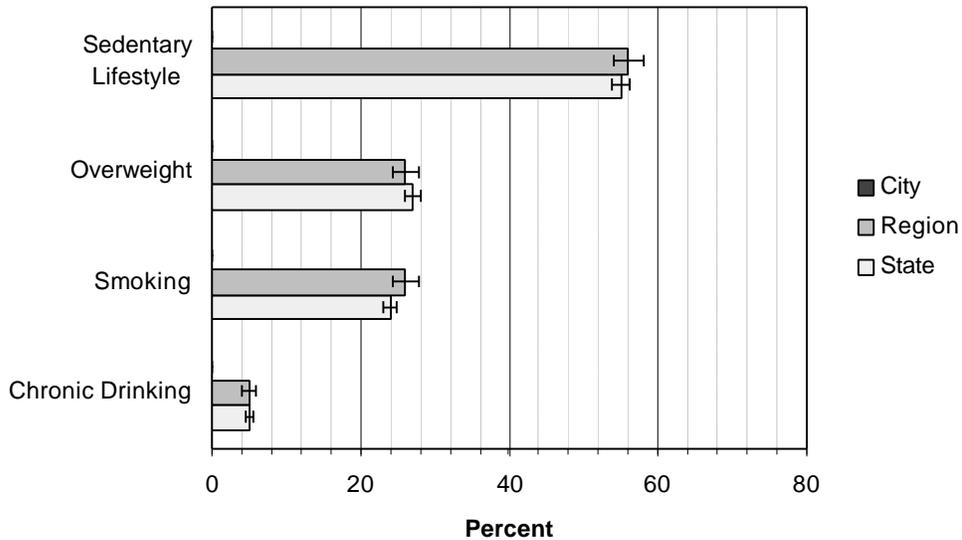


Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

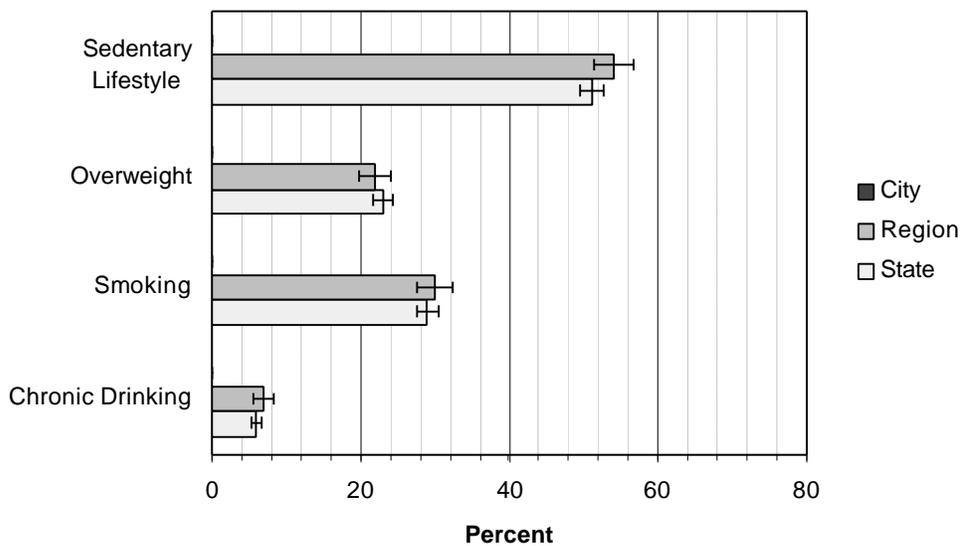
Older people are more likely than younger people to perceive their health as fair or poor. Statewide, about 28 percent of older people (age 65 and over) perceive their health as either fair or poor, compared with about 13 percent of people ages 45-64.

Figure 2a. Percent of Persons with Selected Behavioral Risks, Ages 18 and Older



About half of Wisconsin adults engage in little or no leisure-time physical activity (sedentary lifestyle), making this the most prevalent behavioral risk to health.

Figure 2b. Percent of Persons with Selected Behavioral Risks, Ages 18-44

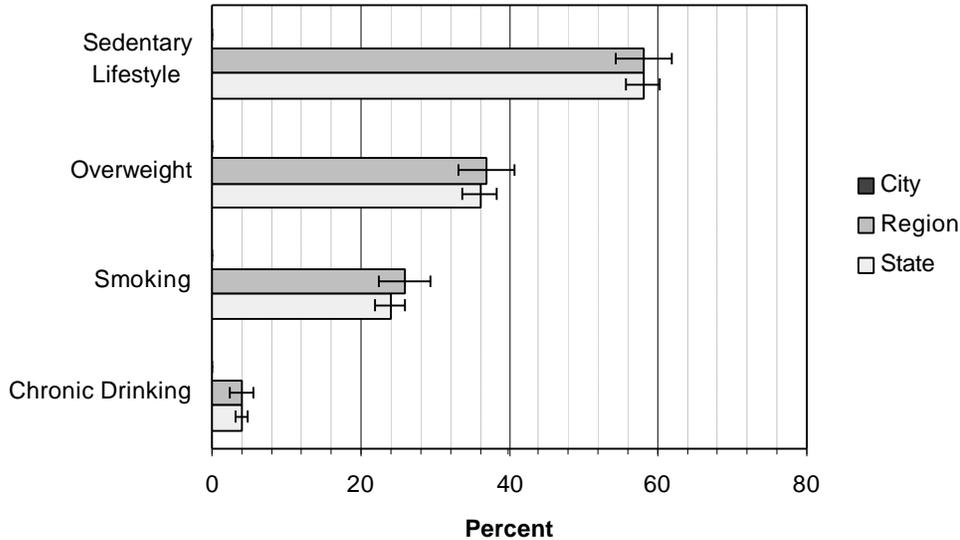


For people ages 18-44, sedentary lifestyle ranks first in statewide prevalence of behavioral risks to health; smoking cigarettes constitutes the second most common behavioral risk.

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except “sedentary lifestyle” (1989-1992, 1994), Center for Health Statistics.

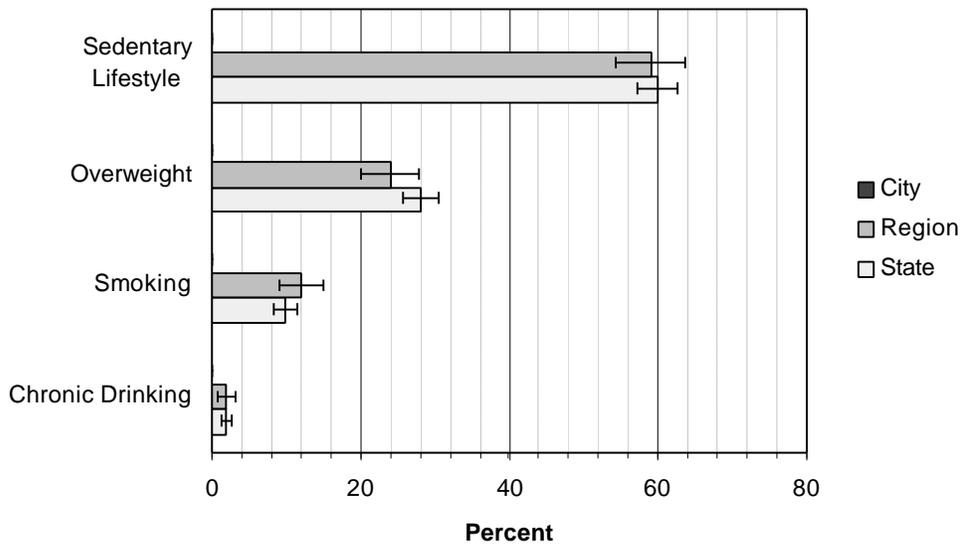
Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 2c. Percent of Persons with Selected Behavioral Risks, Ages 45-64



Among middle-aged people (ages 45-64), being overweight represents the second leading behavioral risk (about 36 percent statewide), and smoking ranks third (24 percent).

Figure 2d. Percent of Persons with Selected Behavioral Risks, Ages 65 and Older



Statewide, sedentary lifestyle and being overweight represent the most prevalent behavioral risks to people age 65 and over (about 60 percent and 28 percent, respectively).

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 2a. Percent of Persons Reported to Have Selected Chronic Conditions, All Ages

Chronic Condition	City		Region		State	
	Percent	(+/-)	Percent	Percent	Percent	Percent
Cancer	2	(0)	3		3	
Diabetes	3	(1)	3		3	
Hypertension	13	(1)	11		11	
Coronary Heart Disease	4	(1)	4		4	
Heart Attack	2	(0)	2		2	
Stroke	1	(0)	1		1	
Asthma	10	(1)	9		8	
Emphysema or Chronic Bronchitis	3	(1)	3		3	
Arthritis	12	(1)	11		11	
Any of the above	31	(1)	30		30	

In Wisconsin, about 30 percent of all people report at least one chronic health condition, with arthritis and hypertension (high blood pressure) being the most frequently named conditions.

Table 2b. Percent of Persons Reported to Have Selected Chronic Conditions, by Age Groups

Chronic Condition	<65				65+					
	City		Region		City		Region		State	
	%	(+/-)	%	%	%	(+/-)	%	%	%	
Cancer	1	(0)	2	2	11	(3)	12	13		
Diabetes	2	(0)	2	2	12	(3)	10	11		
Hypertension	10	(1)	8	8	45	(5)	43	41		
Coronary Heart Disease	2	(0)	2	2	22	(4)	23	21		
Heart Attack	1	(0)	1	1	11	(3)	10	10		
Stroke	1	(0)	0	0	7	(2)	6	6		
Asthma	10	(1)	9	8	9	(3)	7	8		
Emphysema or Chronic Bronchitis	3	(1)	2	2	8	(3)	7	7		
Arthritis	8	(1)	8	7	47	(5)	44	45		
Any of the above	26	(1)	25	24	78	(4)	77	78		

Statewide, about one-fourth of all people under age 65 report at least one chronic health condition, compared with more than three-fourths of all people age 65 and over.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is based on persons who have ever been told by a doctor they have the listed condition. 95% confidence intervals are shown for the city estimates only, because they are based on smaller sample sizes than the estimates for the regions and the state (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 3. Actual and Expected New Cancer Cases by Site

Primary Site	Annual Average 1989-1993	1994		Significant Difference
		Actual	Expected	
Females				
Breast	529	501		
Colorectal	242	201		
Lung, Trachea & Bronchus	191	188		
Cervical	147	124		
Other Sites	695	671		
All Sites	1,804	1,685		
Males				
Colorectal	227	202		
Lung, Trachea & Bronchus	304	309		
Prostate	446	463		
Other Sites	710	701		
All Sites	1,687	1,675		
Total				
Colorectal	469	403		
Lung, Trachea & Bronchus	495	497		
Other Sites	2,527	2,460		
All Sites	3,491	3,360		

**Expected values are
not available below
the county level.**

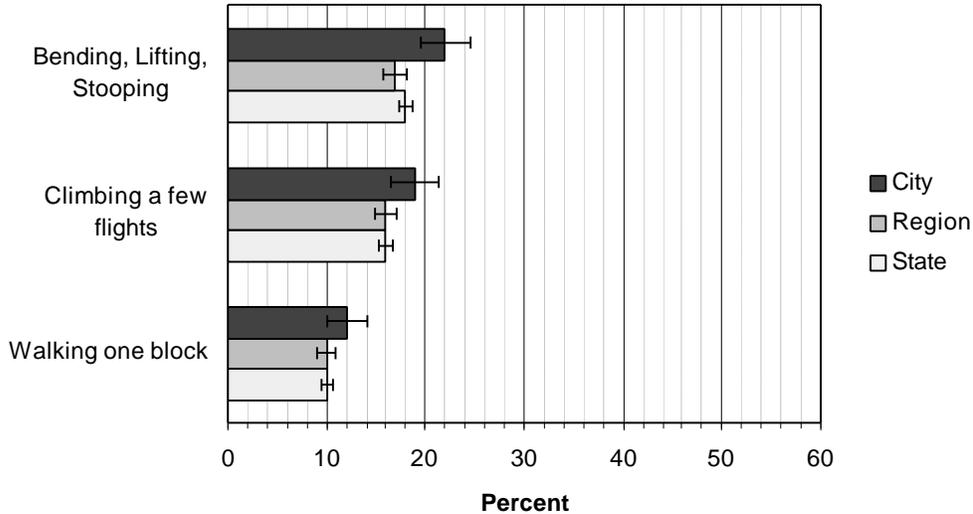
Statewide, breast cancer accounted for about one-fourth of newly reported cancers among Wisconsin women in 1994. Prostate cancer represented about 30 percent of reported cancer incidence among men.

Lung cancer and colorectal cancer each accounted for 13 percent of total cancer incidence in 1994.

Source: Wisconsin Cancer Reporting System, Center for Health Statistics.

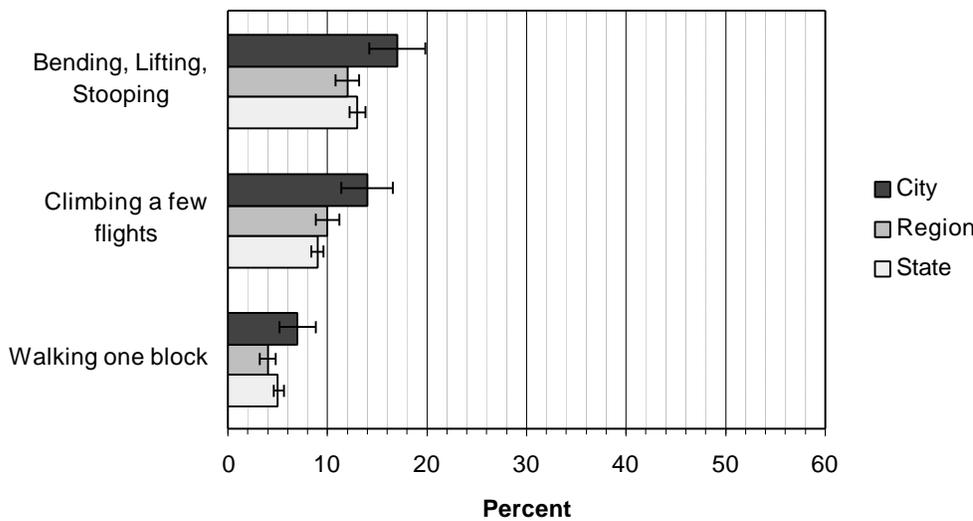
Note: The "expected" number of new cases for 1994 was calculated based on statewide cancer incidence rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of new cases in 1994 and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Figure 3a. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 45 and Older



Among all people age 45 and over in Wisconsin, a health condition limits physical bending, lifting or stooping for about 18 percent; climbing two flights of stairs for about 16 percent; and walking one block for about 10 percent.

Figure 3b. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Ages 45-64

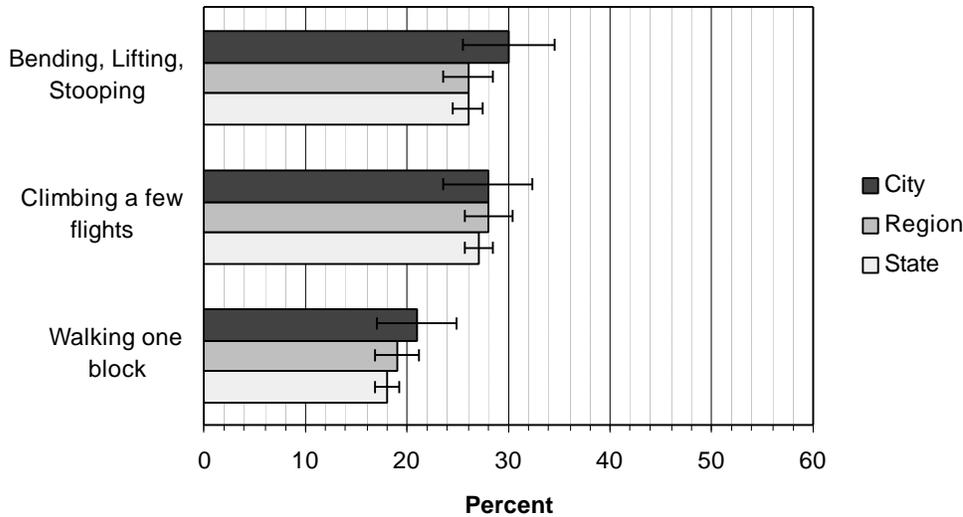


Among people ages 45-64, about 13 percent statewide indicate a limitation in bending, lifting or stooping due to a health condition.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 3c. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 65 and Older



Statewide, more than one-fourth of people age 65 and over face physical limitations in climbing stairs (about 27 percent) or bending, lifting, or stooping (about 26 percent).

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

USE OF SERVICES

Table 4. Number of Home Health Recipients with Chronic Conditions, 1994

Age	Develop. or Phys. Disability	Mental Illness	CNS Disorder	Other Chronic Condition
<55				
55-64	Data for this table are not available below the county level.			
65-74				
75+				
Total				

A chronic condition represented the primary diagnosis for about 29,000 clients of Wisconsin home health agencies in 1994.

Source: Wisconsin Annual Survey of Home Health Agencies, Center for Health Statistics.

Note: This table provides unduplicated counts for 1994 of home health agency patients with chronic conditions; that is, patients whose primary diagnosis was a developmental or physical disability; a mental illness; a central nervous system (CNS) disorder, such as multiple sclerosis; or some other chronic condition. See Technical Notes for more detail about these categories. Counts of home health agency patients in various diagnostic categories are by *location of the agency*.

Table 5. Number of Residents of Skilled Nursing Facilities (SNFs) on December 31, 1994

Age	Develop. Disability	Mental Illness	Physical Disability	All Others
<65	40	150	25	324
65-74	22	312	40	565
75-84	8	597	39	1,271
85+	4	600	30	2,104
Total	74	1,659	134	4,264

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: SNFs are nursing homes licensed to provide medical care needed to restore residents to their rehabilitation potential. This table reflects an unduplicated count of all SNF residents; the count is by *location of the facility*. All SNF residents (regardless of diagnosis) are included in this table. See Technical Notes for detail about the diagnostic categories.

In 1994, about half of all residents of Wisconsin skilled nursing facilities (SNFs) were age 85 or older.

Table 6. Number of Persons Enrolled in the Community Options Program (COP) and Medicaid Waiver Programs in 1994

Age	Frail Elderly	Develop. Disability	Mental Illness	Physical Disability	Other
<18					
18-44					
45-54					
55-64	Data for this table are not available				
65-74	below the county level.				
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: This table provides unduplicated counts of all persons enrolled in the COP and Medicaid waiver programs (CIP2, COP-W, CIP1A, CIP1B, CSLA), which are state-supervised and county-administered programs that provide community-based services to nursing-home-eligible persons. The count in this table reflects *county of residence*. See Technical Notes for more detail about the diagnostic categories.

Statewide, about 18,000 people were enrolled in the Community Options Program or Medicaid waiver programs in 1994; about half the enrollees were under age 65.

Table 7. Number of Publicly-Funded Residents of Community-Based Residential Facilities (CBRFs) in 1994

Age	Develop. Disability	Mental Illness	Physical Disability	AODA	Other
18-44	Data for this table are not available below the county level.				
45-64					
65-74					
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: A CBRF is a home or facility where three or more adults live and receive supportive services in daily living, care, treatment, or protective services beyond room and board; CBRF services may not include nursing care on a permanent basis. This table provides unduplicated counts of persons whose residence in a CBRF in 1994 was publicly funded. (No counts of private-pay CBRF residents are available.) The count is by *resident's county of origin*. Fifty-two residents statewide were reported to be under 18 years of age, and were not included in this table. See Technical Notes for more detail about the resident categories.

Statewide, mental illness constituted the most prevalent primary diagnosis among residents with public funding in community-based residential facilities in 1994.

Table 8. Number of Residents of Facilities for the Developmentally Disabled (FDDs) on December 31, Selected Years

	1990	1992	1994
Total	Data for this table are not available below the county level.		

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: FDDs are nursing homes licensed to provide active treatment and services to residents who are developmentally disabled, primarily due to mental retardation or cerebral palsy. This table reflects an unduplicated count of all FDD residents each year on December 31; the count is by *resident's county of origin*.

Statewide, there were about 3,400 residents in facilities for the developmentally disabled in 1994, nearly 500 fewer than in 1990.

Table 9. Number of Hospitalizations for Selected Chronic Conditions, by Age, 1994

Chronic Conditions	<18	18-44	45-64	65-74	75+
AIDS/HIV	3	22	4	0	0
Cancer					
Breast	0	28	108	62	55
Colorectal	0	14	55	46	92
Lung, Trachea, & Bronchus	0	10	82	83	59
Cervical	0	23	17	3	2
Prostate	2	0	53	49	37
Other Cancers	52	564	641	383	393
Diabetes	61	390	349	162	145
Mental Illness					
Affective Disorders	211	1,292	331	97	126
Schizophrenias/Psychoses	11	772	201	62	49
Anxiety/Char Dis Inc Deprsn	128	169	51	25	38
Dementias	0	3	22	47	144
Alcohol and Other Drug Abuse	36	3,018	324	29	7
Other Mental Illness	144	35	3	0	0
Paralysis & Cerebral Palsy	3	14	8	5	6
Hypertension	4	59	43	24	14
Congestive Heart Failure	5	151	546	440	859
Coronary Heart Disease	0	184	971	741	689
Stroke	5	104	303	405	614
Asthma	751	558	194	79	71
Other Chronic Lung Disease	14	86	245	208	212
Liver Disease/Cirrhosis	0	68	57	17	9
Other Chronic Condition	156	806	738	523	550
Total Hospitalizations for Chronic Conditions	1,586	8,370	5,346	3,490	4,171
Total Hospitalizations	16,064	29,785	12,112	7,746	10,686

Statewide, a chronic condition constituted the primary diagnosis for about 30 percent of the approximately 602,000 total hospitalizations in 1994.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions.

Corrections to Mental Illness categories made January, 1998

Table 10. Actual and Expected Hospitalizations for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
AIDS/HIV	58	29		
Cancer				
Breast	268	253		
Colorectal	237	207		
Lung, Trachea, & Bronchus	254	234		
Cervical	37	45		
Prostate	190	141		
Other Cancers	2,211	2,033		
Diabetes	1,001	1,107		
Mental Illness				
Affective Disorders	1,643	2,057		
Schizophrenias/Psychoses	1,009	1,095	Expected values are not available below the county level.	
Anxiety/Char Dis Inc Deprsn	498	411		
Dementias	190	216		
Alcohol and Other Drug Abuse	2,948	3,414		
Other Mental Illness	201	182		
Paralysis & Cerebral Palsy	31	36		
Hypertension	149	144		
Congestive Heart Failure	1,896	2,001		
Coronary Heart Disease	2,832	2,585		
Stroke	1,452	1,431		
Asthma	1,644	1,653		
Other Chronic Lung Disease	529	765		
Liver Disease/Cirrhosis	162	151		
Other Chronic Conditions	3,118	2,773		
Total Hospitalizations for Chronic Conditions	22,559	22,963		

Coronary heart disease, congestive heart failure, stroke, cancer and chronic lung disease accounted for more than half of all 1994 Wisconsin hospitalizations for which a chronic condition constituted the primary diagnosis.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions. The "expected" number of hospitalizations was calculated based on statewide hospitalization rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of hospitalizations and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Corrections to Mental Illness categories made January, 1998

Table 11. Hospitalizations for a Chronic Condition with a Secondary Diagnosis of Diabetes, by Principal Diagnosis, 1994

Principal Diagnosis	<55	55-74	75+	Total
Mental Illness	143	81	43	267
Coronary Heart Disease	148	395	131	674
Stroke	45	169	110	324
Chronic Lung Disease	74	107	49	230
Other Chronic Condition	313	806	358	1,477
Total	723	1,558	691	2,972

Source: Office of Health Care Information, hospital inpatient database.

Note: This table presents only those hospitalizations with a secondary diagnosis of diabetes for which the principal diagnosis was one of the selected chronic conditions examined. Diabetes is also associated with hospitalizations for complications not shown here, such as limb amputations and kidney failure.

About 14 percent of all hospitalizations for a chronic condition included a secondary diagnosis of diabetes.

Table 12. Medicaid-Reimbursed Health Services for People with Chronic Conditions, 1994

Services	Number of Recipients	Payment (in thousands)
Hospitalizations - Inpatient	9,924	\$65,543
Hospitalizations- Outpatient	20,743	16,918
Nursing Home	5,355	99,937
Physician	32,879	17,678
Pharmacy	31,991	28,361
Home Care	2,488	18,076
Mental Health	7,745	4,470
Therapies	2,531	4,060
Other	33,726	35,794
Total	36,260	\$290,704

Source: Medicaid Claims, Bureau of Health Care Financing.

Note: The counts in this table do not include any services provided by an HMO. "Therapies" include physical therapy, occupational therapy, speech and hearing therapy, group therapy, and comprehensive outpatient therapy provided by rehabilitation agencies. "Other" includes emergency room, durable medical equipment, lab and X-ray, dental, transportation, HealthCheck, and all other Medicaid services. See Technical Notes for list of chronic conditions and their ICD-9-CM codes.

Statewide, Medicaid paid about \$1.6 billion for services to people with chronic health conditions in 1994.

MORTALITY

Table 13. Mortality Attributed to Selected Chronic Conditions, 1994

Chronic Condition	<45	45-64	65-74	75+
HIV/AIDS	62	12	0	0
Cancer				
Breast	8	34	21	31
Colorectal	7	26	29	69
Lung, Trachea, & Bronchus	6	102	115	118
Cervical	4	8	4	0
Prostate	0	11	15	70
Diabetes	10	39	41	55
Congestive Heart Failure	1	3	10	76
Coronary Heart Disease	27	195	274	777
Stroke	13	44	78	274
Chronic Lung Disease	5	26	65	146
Liver Disease/Cirrhosis	14	33	11	11
Total (Chronic Conditions)	157	533	663	1,627
Total (All Deaths)	740	973	1,132	2,902

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death. Several conditions may be cited on the death certificate; one is selected using criteria established by the National Center for Health Statistics as the "underlying cause of death," that is, "the disease or injury which initiated the chain of events leading directly or indirectly to death." See Technical Notes for ICD-9-CM codes.

Table 14. Actual and Expected Mortality for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
HIV/AIDS	64	74		
Cancer				
Breast	123	94		
Colorectal	142	131		
Lung, Trachea, & Bronchus	346	341		
Cervical	13	16		
Prostate	84	96		
Diabetes	143	145		
Congestive Heart Failure	110	90		
Coronary Heart Disease	1,427	1,273		
Stroke	400	409		
Chronic Lung Disease	238	242		
Liver Disease/Cirrhosis	67	69		
Total	3,158	2,980		

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death (see note, Table 13). The "expected" number of deaths was based on statewide mortality rates by age and sex (see Technical Notes). The last column indicates whether there was a statistically significant difference between the expected number of deaths and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

In 1994, chronic conditions accounted for about half (24,390) of all Wisconsin deaths.

Statewide, coronary heart disease represented the leading cause of death due to a chronic health condition in 1994.

Central Milwaukee City

DEMOGRAPHICS

Table 1. Population by Age, 1990 and Selected Years

Age	1990	% Female	1994	2000	2010
<18	91,516	49%			
18-34	85,773	53			
35-44	35,402	52			
45-54	19,958	54			
55-64	17,353	55			
65-74	15,589	60			
75-84	9,189	66			
85+	2,877	72			
Total	277,657	53%			

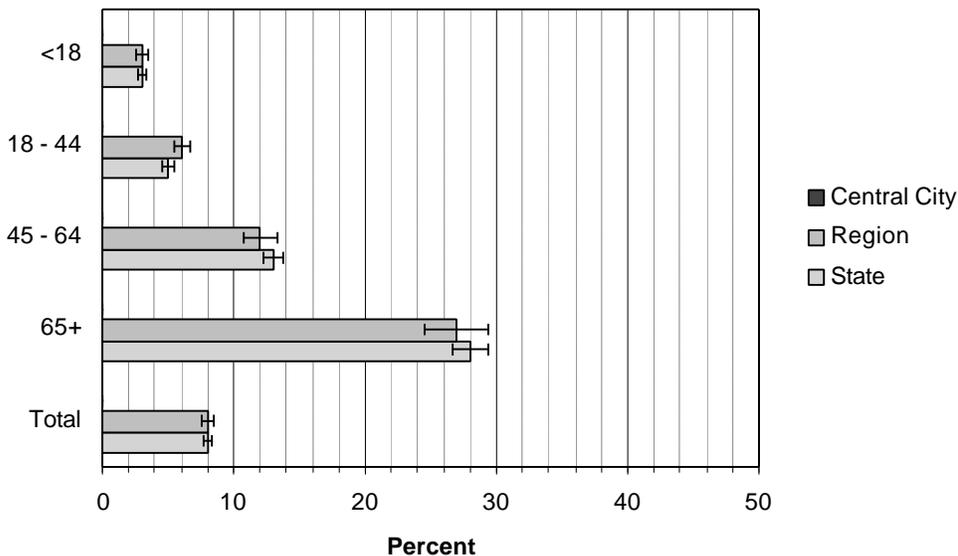
Projections are not available below the county level.

Source: 1990 data are from the U.S. Census of Population and Housing, Modified Age-Race-Sex (MARS) file. 1994 estimates are from the Wisconsin Center for Health Statistics. Projections for 2000 and 2010 are from the Demographic Services Center, Wisconsin Department of Administration.

Statewide, the number of people age 55 and over is expected to increase by one-third during the 20-year interval from 1990 to 2010.

HEALTH STATUS

Figure 1. Percent of Persons with Fair or Poor Health

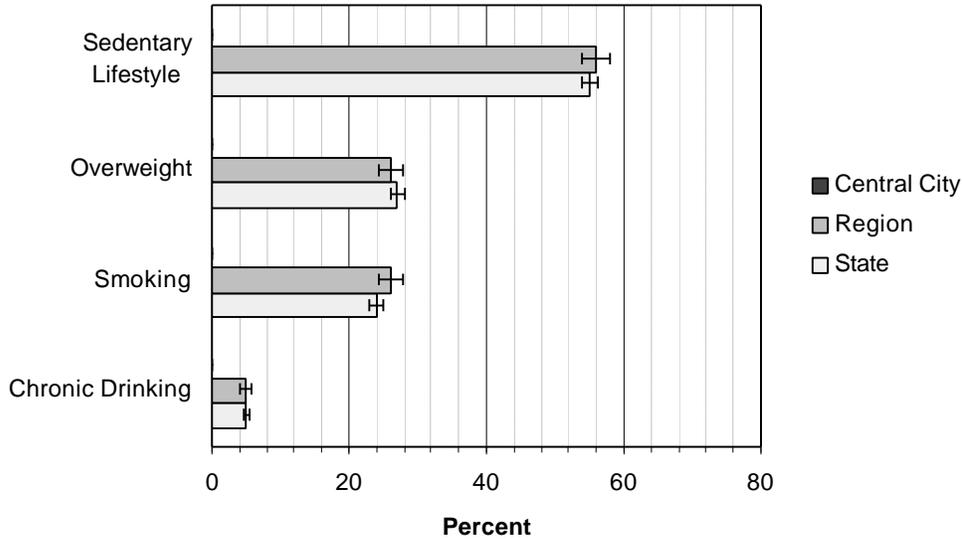


Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

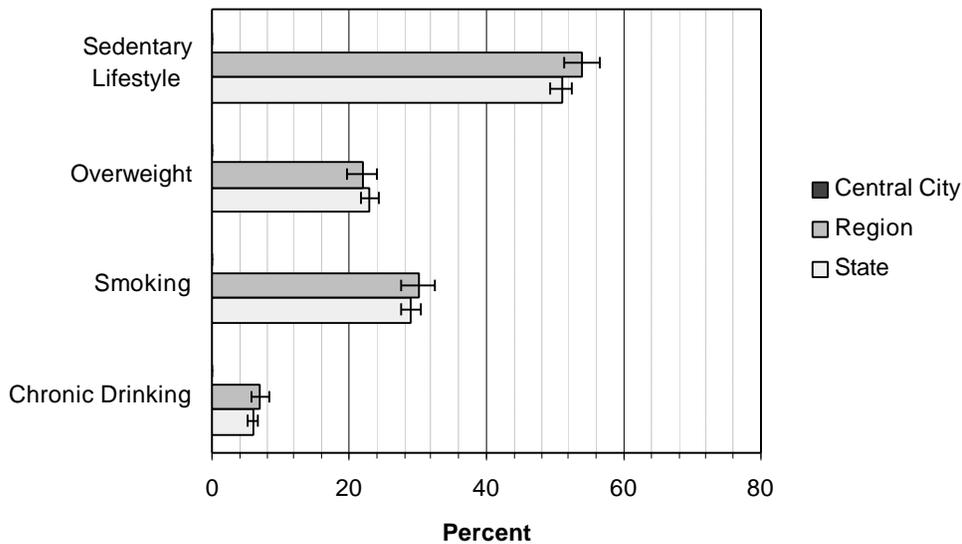
Older people are more likely than younger people to perceive their health as fair or poor. Statewide, about 28 percent of older people (age 65 and over) perceive their health as either fair or poor, compared with about 13 percent of people ages 45-64.

Figure 2a. Percent of Persons with Selected Behavioral Risks, Ages 18 and Older



About half of Wisconsin adults engage in little or no leisure-time physical activity (sedentary lifestyle), making this the most prevalent behavioral risk to health.

Figure 2b. Percent of Persons with Selected Behavioral Risks, Ages 18-44

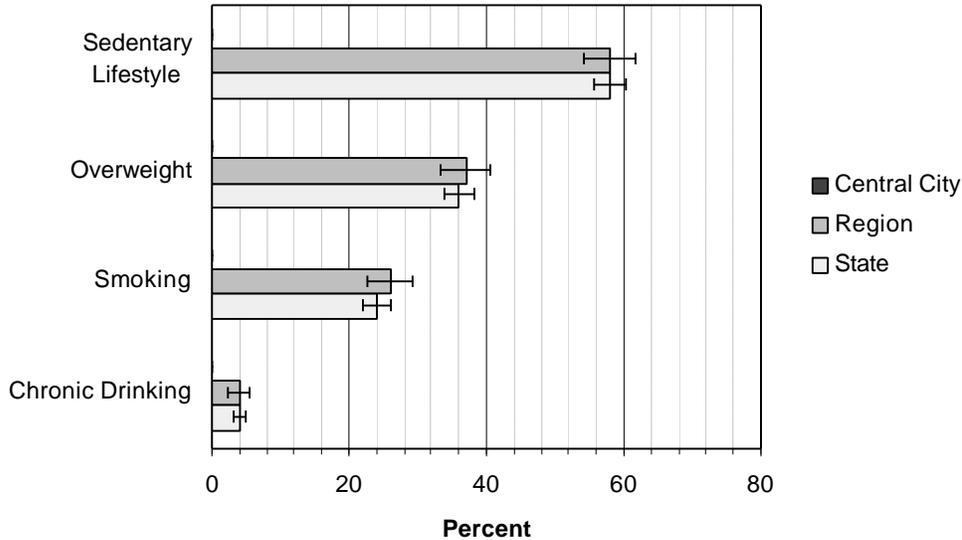


For people ages 18-44, sedentary lifestyle ranks first in statewide prevalence of behavioral risks to health; smoking cigarettes constitutes the second most common behavioral risk.

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

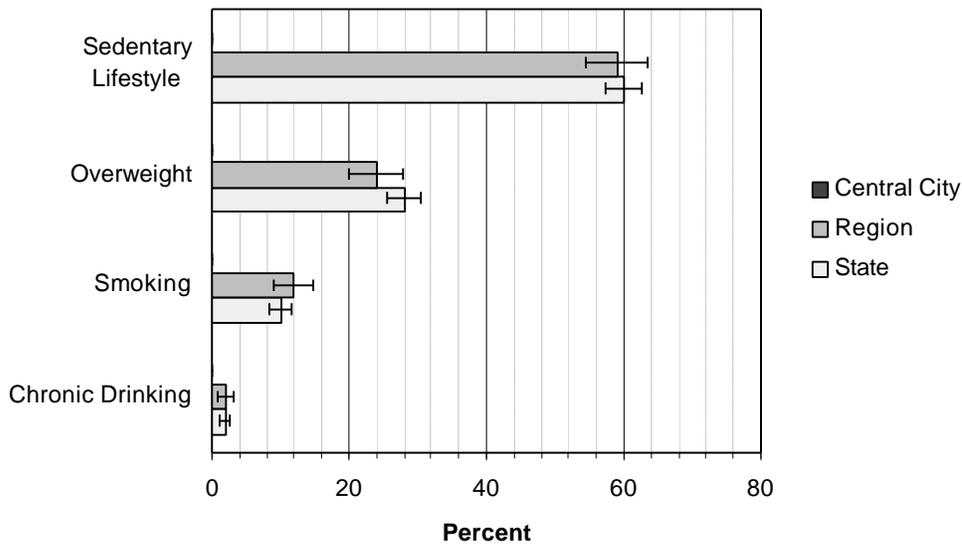
Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 2c. Percent of Persons with Selected Behavioral Risks, Ages 45-64



Among middle-aged people (ages 45-64), being overweight represents the second leading behavioral risk (about 36 percent statewide), and smoking ranks third (24 percent).

Figure 2d. Percent of Persons with Selected Behavioral Risks, Ages 65 and Older



Statewide, sedentary lifestyle and being overweight represent the most prevalent behavioral risks to people age 65 and over (about 60 percent and 28 percent, respectively).

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 2a. Percent of Persons Reported to Have Selected Chronic Conditions, All Ages

Chronic Condition	Area		Region	State
	Percent	(+/-)	Percent	Percent
Cancer			3	3
Diabetes			3	3
Hypertension			11	11
Coronary Heart Disease	Data for this table are not available below the county level.		4	4
Heart Attack			2	2
Stroke			1	1
Asthma			9	8
Emphysema or Chronic Bronchitis			3	3
Arthritis			11	11
Any of the above			30	30

In Wisconsin, about 30 percent of all people report at least one chronic health condition, with arthritis and hypertension (high blood pressure) being the most frequently named conditions.

Table 2b. Percent of Persons Reported to Have Selected Chronic Conditions, by Age Groups

Chronic Condition	<65			65+		
	Area % (+/-)	Region %	State %	Area % (+/-)	Region %	State %
Cancer		2	2		12	13
Diabetes		2	2		10	11
Hypertension		8	8		43	41
Coronary Heart Disease		2	2		23	21
Heart Attack		1	1		10	10
Stroke		0	0		6	6
Asthma		9	8		7	8
Emphysema or Chronic Bronchitis		2	2		7	7
Arthritis		8	7		44	45
Any of the above		25	24		77	78

Statewide, about one-fourth of all people under age 65 report at least one chronic health condition, compared with more than three-fourths of all people age 65 and over.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is based on persons who have ever been told by a doctor they have the listed condition. 95% confidence intervals are shown for the area estimates only, because they are based on smaller sample sizes than the estimates for the regions and the state (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 3. Actual and Expected New Cancer Cases by Site

Primary Site	Annual Average 1989-1993	1994		Significant Difference
		Actual	Expected	
Females				
Breast	156	165		
Colorectal	75	59		
Lung, Trachea & Bronchus	61	66		
Cervical	61	54		
Other Sites	201	219		
All Sites	554	563		
Males				
Colorectal	76	61		
Lung, Trachea & Bronchus	115	125		
Prostate	135	149		
Other Sites	234	215		
All Sites	560	550		
Total				
Colorectal	151	120		
Lung, Trachea & Bronchus	176	191		
Other Sites	787	802		
All Sites	1,114	1,113		

Statewide, breast cancer accounted for about one-fourth of newly reported cancers among Wisconsin women in 1994. Prostate cancer represented about 30 percent of reported cancer incidence among men.

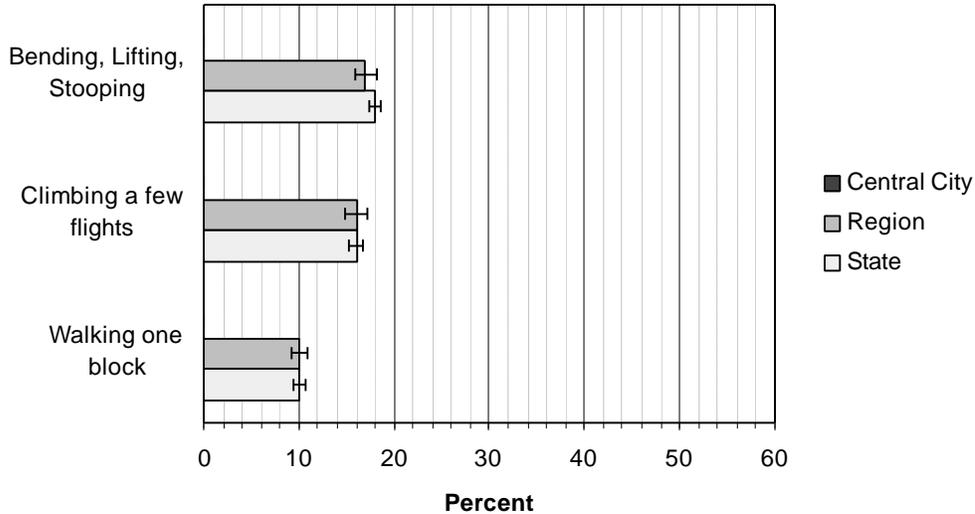
Lung cancer and colorectal cancer each accounted for 13 percent of total cancer incidence in 1994.

Expected values are not available below the county level.

Source: Wisconsin Cancer Reporting System, Center for Health Statistics.

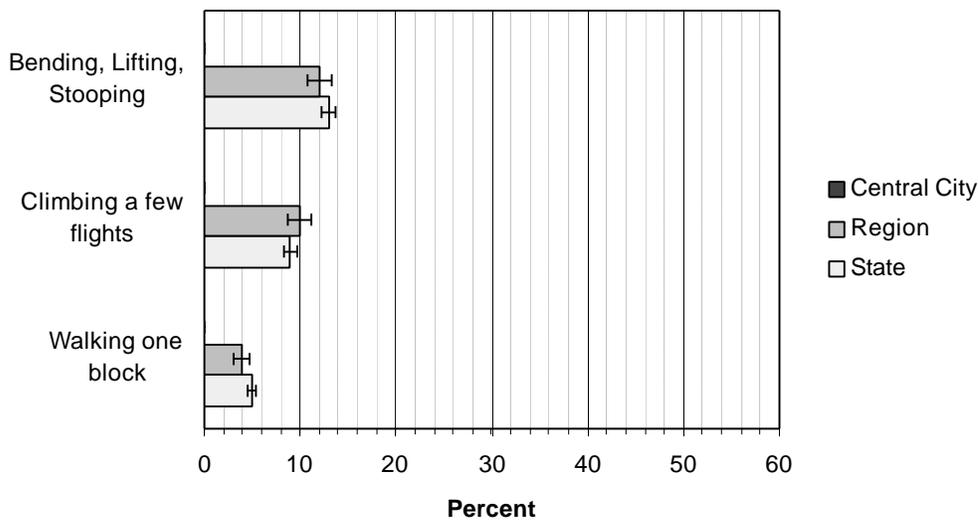
Note: The "expected" number of new cases for 1994 was calculated based on statewide cancer incidence rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of new cases in 1994 and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Figure 3a. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 45 and Older



Among all people age 45 and over in Wisconsin, a health condition limits physical bending, lifting or stooping for about 18 percent; climbing two flights of stairs for about 16 percent; and walking one block for about 10 percent.

Figure 3b. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Ages 45-64

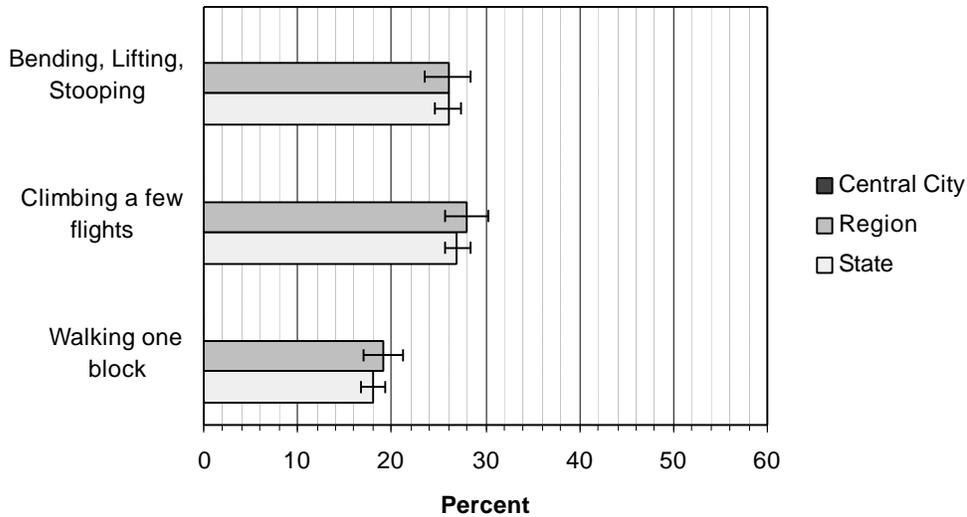


Among people ages 45-64, about 13 percent statewide indicate a limitation in bending, lifting or stooping due to a health condition.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 3c. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 65 and Older



Statewide, more than one-fourth of people age 65 and over face physical limitations in climbing stairs (about 27 percent) or bending, lifting, or stooping (about 26 percent).

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

USE OF SERVICES

Table 4. Number of Home Health Recipients with Chronic Conditions, 1994

Age	Develop. or Phys. Disability	Mental Illness	CNS Disorder	Other Chronic Condition
<55	Data for this table are not available below the county level.			
55-64				
65-74				
75+				
Total				

A chronic condition represented the primary diagnosis for about 29,000 clients of Wisconsin home health agencies in 1994.

Source: Wisconsin Annual Survey of Home Health Agencies, Center for Health Statistics.

Note: This table provides unduplicated counts for 1994 of home health agency patients with chronic conditions; that is, patients whose primary diagnosis was a developmental or physical disability; a mental illness; a central nervous system (CNS) disorder, such as multiple sclerosis; or some other chronic condition. See Technical Notes for more detail about these categories. Counts of home health agency patients in various diagnostic categories are by *location of the agency*.

Table 5. Number of Residents of Skilled Nursing Facilities (SNFs) on December 31, 1994

Age	Develop. Disability	Mental Illness	Physical Disability	All Others
<65	8	24	5	55
65-74	3	78	14	102
75-84	2	102	3	199
85+	0	128	4	268
Total	13	332	26	624

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: SNFs are nursing homes licensed to provide medical care needed to restore residents to their rehabilitation potential. This table reflects an unduplicated count of all SNF residents; the count is by *location of the facility*. All SNF residents (regardless of diagnosis) are included in this table. See Technical Notes for detail about the diagnostic categories.

In 1994, about half of all residents of Wisconsin skilled nursing facilities (SNFs) were age 85 or older.

Table 6. Number of Persons Enrolled in the Community Options Program (COP) and Medicaid Waiver Programs in 1994

Age	Frail Elderly	Develop. Disability	Mental Illness	Physical Disability	Other
<18					
18-44					
45-54					
55-64	Data for this table are not available				
65-74	below the county level.				
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: This table provides unduplicated counts of all persons enrolled in the COP and Medicaid waiver programs (CIP2, COP-W, CIP1A, CIP1B, CSLA), which are state-supervised and county-administered programs that provide community-based services to nursing-home-eligible persons. The count in this table reflects *county of residence*. See Technical Notes for more detail about the diagnostic categories.

Statewide, about 18,000 people were enrolled in the Community Options Program or Medicaid waiver programs in 1994; about half the enrollees were under age 65.

Table 7. Number of Publicly-Funded Residents of Community-Based Residential Facilities (CBRFs) in 1994

Age	Develop. Disability	Mental Illness	Physical Disability	AODA	Other
18-44	Data for this table are not available below the county level.				
45-64					
65-74					
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: A CBRF is a home or facility where three or more adults live and receive supportive services in daily living, care, treatment, or protective services beyond room and board; CBRF services may not include nursing care on a permanent basis. This table provides unduplicated counts of persons whose residence in a CBRF in 1994 was publicly funded. (No counts of private-pay CBRF residents are available.) The count is by *resident's county of origin*. Fifty-two residents statewide were reported to be under 18 years of age, and were not included in this table. See Technical Notes for more detail about the resident categories.

Statewide, mental illness constituted the most prevalent primary diagnosis among residents with public funding in community-based residential facilities in 1994.

Table 8. Number of Residents of Facilities for the Developmentally Disabled (FDDs) on December 31, Selected Years

	1990	1992	1994
Total	Data for this table are not available below the county level.		

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: FDDs are nursing homes licensed to provide active treatment and services to residents who are developmentally disabled, primarily due to mental retardation or cerebral palsy. This table reflects an unduplicated count of all FDD residents each year on December 31; the count is by *resident's county of origin*.

Statewide, there were about 3,400 residents in facilities for the developmentally disabled in 1994, nearly 500 fewer than in 1990.

Table 9. Number of Hospitalizations for Selected Chronic Conditions, by Age, 1994

Chronic Conditions	<18	18-44	45-64	65-74	75+
AIDS/HIV	1	19	2	0	0
Cancer					
Breast	0	15	55	30	17
Colorectal	0	8	16	14	36
Lung, Trachea, & Bronchus	0	7	55	38	31
Cervical	0	15	8	0	2
Prostate	2	0	27	18	10
Other Cancers	32	305	282	164	163
Diabetes	36	234	209	98	66
Mental Illness					
Affective Disorders	114	769	156	40	35
Schizophrenias/Psychoses	6	545	137	28	15
Anxiety/Char Dis Inc Deprsn	89	98	29	11	20
Dementias	0	3	11	17	49
Alcohol and Other Drug Abuse	19	2,096	210	12	2
Other Mental Illness	101	12	1	0	0
Paralysis & Cerebral Palsy	0	7	4	4	3
Hypertension	1	34	24	7	10
Congestive Heart Failure	5	105	350	235	391
Coronary Heart Disease	0	94	466	322	283
Stroke	4	58	176	179	247
Asthma	485	382	115	43	39
Other Chronic Lung Disease	7	47	156	114	89
Liver Disease/Cirrhosis	0	46	33	11	6
Other Chronic Condition	106	387	332	229	219
Total Hospitalizations for Chronic Conditions	1,008	5,286	2,854	1,614	1,733
Total Hospitalizations	9,889	18,207	6,540	3,497	4,345

Statewide, a chronic condition constituted the primary diagnosis for about 30 percent of the approximately 602,000 total hospitalizations in 1994.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions.

Corrections to Mental Illness categories made January, 1998

Table 10. Actual and Expected Hospitalizations for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
AIDS/HIV	34	22		
Cancer				
Breast	120	117		
Colorectal	106	74		
Lung, Trachea, & Bronchus	133	131		
Cervical	25	25		
Prostate	94	57		
Other Cancers	1,049	946		
Diabetes	596	643		
Mental Illness				
Affective Disorders	877	1,114		
Schizophrenias/Psychoses	691	731		
Anxiety/Char Dis Inc Deprsn	304	247		
Dementias	88	80		
Alcohol and Other Drug Abuse	2,063	2,339		
Other Mental Illness	129	114		
Paralysis & Cerebral Palsy	15	18		
Hypertension	92	76		
Congestive Heart Failure	994	1,086		
Coronary Heart Disease	1,302	1,165		
Stroke	717	664		
Asthma	1,099	1,064		
Other Chronic Lung Disease	273	413		
Liver Disease/Cirrhosis	101	96		
Other Chronic Conditions	1,480	1,273		
Total Hospitalizations for Chronic Conditions	12,383	12,495		

Coronary heart disease, congestive heart failure, stroke, cancer and chronic lung disease accounted for more than half of all 1994 Wisconsin hospitalizations for which a chronic condition constituted the primary diagnosis.

Expected values are not available below the county level.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions. The "expected" number of hospitalizations was calculated based on statewide hospitalization rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of hospitalizations and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Corrections to Mental Illness categories made January, 1998

Table 11. Hospitalizations for a Chronic Condition with a Secondary Diagnosis of Diabetes, by Principal Diagnosis, 1994

Principal Diagnosis	<55	55-74	75+	Total
Mental Illness	83	36	15	134
Coronary Heart Disease	74	191	53	318
Stroke	26	93	47	166
Chronic Lung Disease	48	71	21	140
Other Chronic Condition	183	445	167	795
Total	414	836	303	1,553

Source: Office of Health Care Information, hospital inpatient database.

Note: This table presents only those hospitalizations with a secondary diagnosis of diabetes for which the principal diagnosis was one of the selected chronic conditions examined. Diabetes is also associated with hospitalizations for complications not shown here, such as limb amputations and kidney failure.

About 14 percent of all hospitalizations for a chronic condition included a secondary diagnosis of diabetes.

Table 12. Medicaid-Reimbursed Health Services for People with Chronic Conditions, 1994

Services	Number of Recipients	Payment (in thousands)
Hospitalizations - Inpatient	5,688	\$40,025
Hospitalizations- Outpatient	11,895	10,020
Nursing Home	1,451	25,542
Physician	18,686	10,228
Pharmacy	17,563	13,974
Home Care	1,440	10,376
Mental Health	4,451	2,662
Therapies	1,270	2,051
Other	18,826	20,765
Total	20,140	\$135,473

Source: Medicaid Claims, Bureau of Health Care Financing.

Note: The counts in this table do not include any services provided by an HMO. "Therapies" include physical therapy, occupational therapy, speech and hearing therapy, group therapy, and comprehensive outpatient therapy provided by rehabilitation agencies. "Other" includes emergency room, durable medical equipment, lab and X-ray, dental, transportation, HealthCheck, and all other Medicaid services. See Technical Notes for list of chronic conditions and their ICD-9-CM codes.

Statewide, Medicaid paid about \$1.6 billion for services to people with chronic health conditions in 1994.

MORTALITY

Table 13. Mortality Attributed to Selected Chronic Conditions, 1994

Chronic Condition	<45	45-64	65-74	75+
HIV/AIDS	30	6	0	0
Cancer				
Breast	4	14	8	9
Colorectal	5	12	8	28
Lung, Trachea, & Bronchus	1	49	43	51
Cervical	1	6	2	0
Prostate	0	3	8	21
Diabetes	4	20	16	14
Congestive Heart Failure	1	2	4	21
Coronary Heart Disease	10	84	101	255
Stroke	9	21	31	76
Chronic Lung Disease	2	14	18	40
Liver Disease/Cirrhosis	7	15	4	3
Total (Chronic Conditions)	74	246	243	518
Total (All Deaths)	419	440	440	904

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death. Several conditions may be cited on the death certificate; one is selected using criteria established by the National Center for Health Statistics as the "underlying cause of death," that is, "the disease or injury which initiated the chain of events leading directly or indirectly to death." See Technical Notes for ICD-9-CM codes.

Table 14. Actual and Expected Mortality for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
HIV/AIDS	32	36		
Cancer				
Breast	43	35		
Colorectal	55	53		
Lung, Trachea, & Bronchus	137	144		
Cervical	7	9		
Prostate	31	32		
Diabetes	60	54		
Congestive Heart Failure	38	28		
Coronary Heart Disease	512	450		
Stroke	142	137		
Chronic Lung Disease	89	74		
Liver Disease/Cirrhosis	36	29		
Total	1,182	1,081		

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death (see note, Table 13). The "expected" number of deaths was based on statewide mortality rates by age and sex (see Technical Notes). The last column indicates whether there was a statistically significant difference between the expected number of deaths and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

In 1994, chronic conditions accounted for about half (24,390) of all Wisconsin deaths.

Statewide, coronary heart disease represented the leading cause of death due to a chronic health condition in 1994.

Milwaukee County minus Milwaukee City

DEMOGRAPHICS

Table 1. Population by Age, 1990 and Selected Years

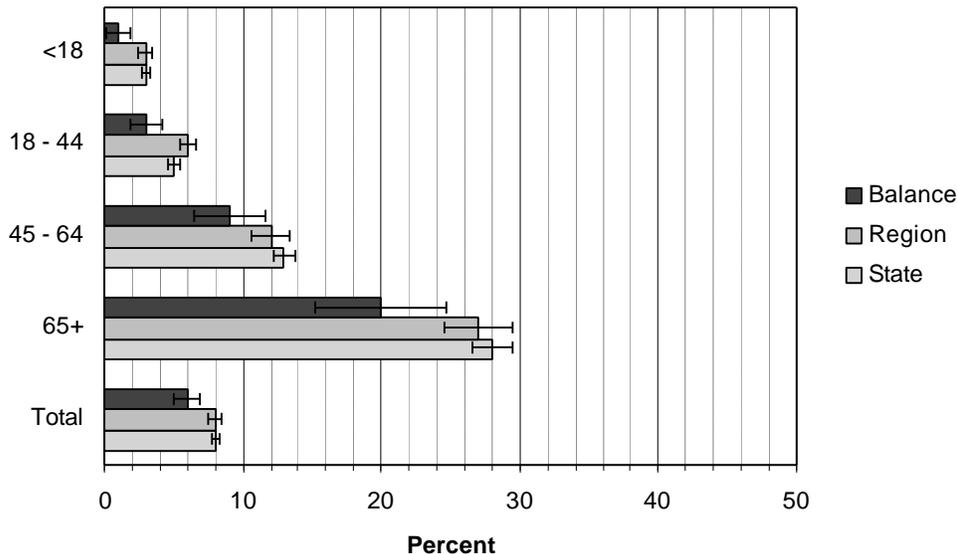
Age	1990	% Female	1994	2000	2010
<18	74,324	49%	81,141		
18-34	85,650	50	74,550		
35-44	51,276	51	61,072		
45-54	34,505	52	44,193	Projections are not available below the county level.	
55-64	33,064	53	28,712		
65-74	29,000	57	26,253		
75-84	17,523	65	17,823		
85+	5,845	75	6,333		
Total	331,187	52%	340,078	356,240	380,818

Source: 1990 data are from the U.S. Census of Population and Housing, Modified Age-Race-Sex (MARS) file. 1994 estimates are from the Wisconsin Center for Health Statistics. Projections for 2000 and 2010 are from the Demographic Services Center, Wisconsin Department of Administration.

Statewide, the number of people age 55 and over is expected to increase by one-third during the 20-year interval from 1990 to 2010.

HEALTH STATUS

Figure 1. Percent of Persons with Fair or Poor Health

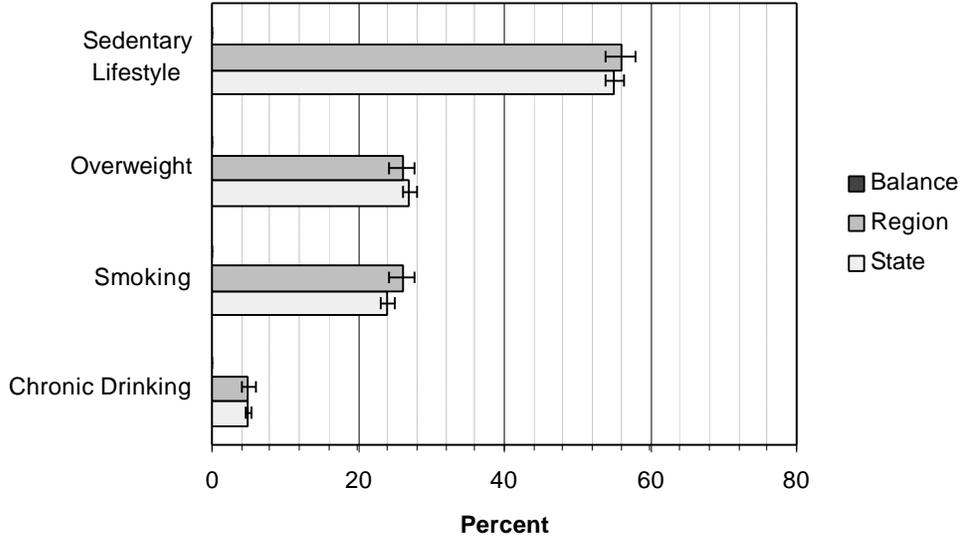


Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

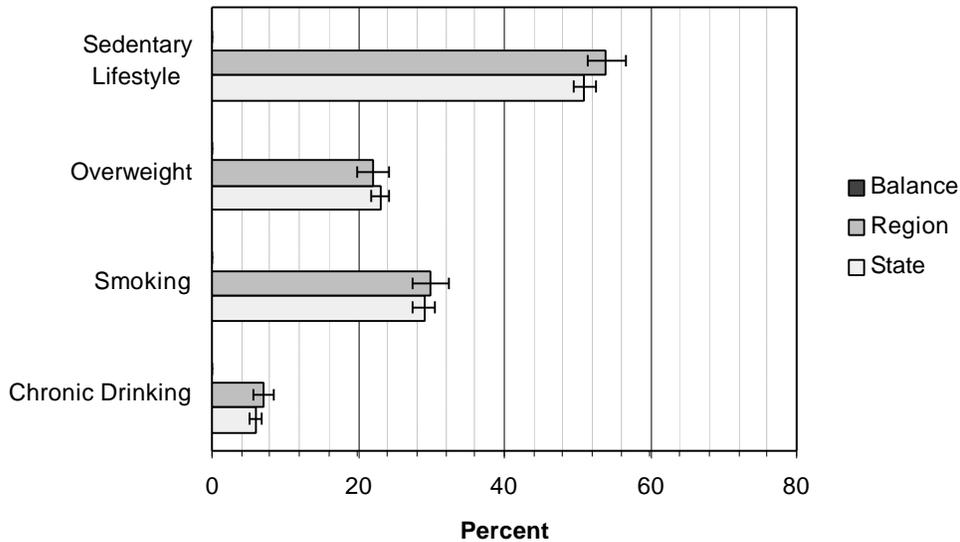
Older people are more likely than younger people to perceive their health as fair or poor. Statewide, about 28 percent of older people (age 65 and over) perceive their health as either fair or poor, compared with about 13 percent of people ages 45-64.

Figure 2a. Percent of Persons with Selected Behavioral Risks, Ages 18 and Older



About half of Wisconsin adults engage in little or no leisure-time physical activity (sedentary lifestyle), making this the most prevalent behavioral risk to health.

Figure 2b. Percent of Persons with Selected Behavioral Risks, Ages 18-44

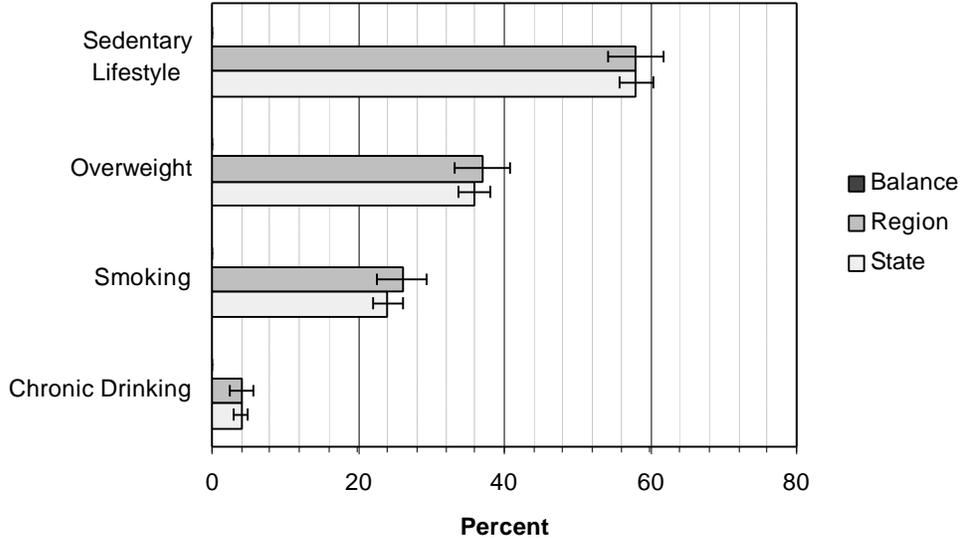


For people ages 18-44, sedentary lifestyle ranks first in statewide prevalence of behavioral risks to health; smoking cigarettes constitutes the second most common behavioral risk.

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

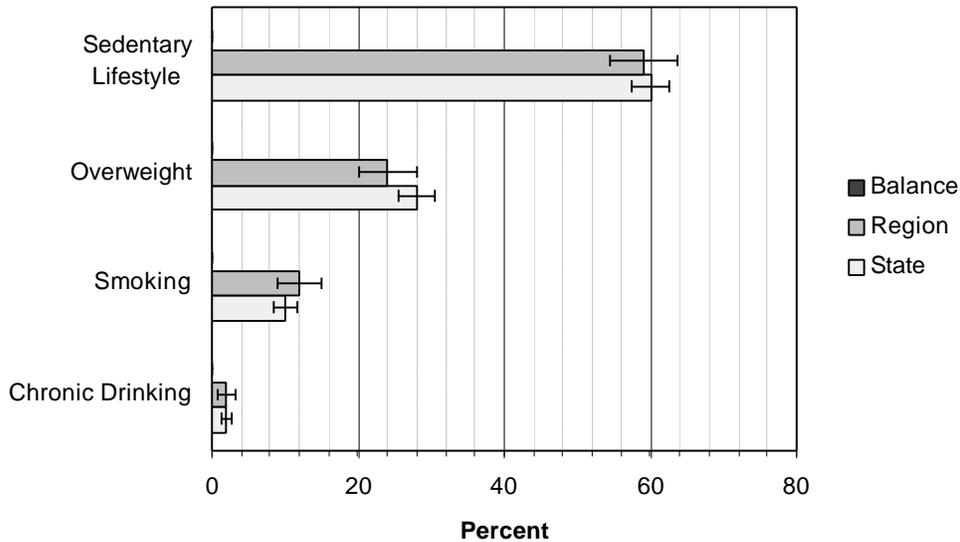
Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 2c. Percent of Persons with Selected Behavioral Risks, Ages 45-64



Among middle-aged people (ages 45-64), being overweight represents the second leading behavioral risk (about 36 percent statewide), and smoking ranks third (24 percent).

Figure 2d. Percent of Persons with Selected Behavioral Risks, Ages 65 and Older



Statewide, sedentary lifestyle and being overweight represent the most prevalent behavioral risks to people age 65 and over (about 60 percent and 28 percent, respectively).

Source: Wisconsin Behavioral Risk Factor Survey, 1990-1994 combined data for all indicators except "sedentary lifestyle" (1989-1992, 1994), Center for Health Statistics.

Note: See Technical Notes for definitions of behavioral risks. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 2a. Percent of Persons Reported to Have Selected Chronic Conditions, All Ages

Chronic Condition	Area		Region		State	
	Percent	(+/-)	Percent	Percent	Percent	Percent
Cancer	3	(1)	3	3	3	3
Diabetes	2	(1)	3	3	3	3
Hypertension	11	(1)	11	11	11	11
Coronary Heart Disease	4	(1)	4	4	4	4
Heart Attack	2	(1)	2	2	2	2
Stroke	1	(0)	1	1	1	1
Asthma	9	(1)	9	9	8	8
Emphysema or Chronic Bronchitis	3	(1)	3	3	3	3
Arthritis	12	(1)	11	11	11	11
Any of the above	30	(2)	30	30	30	30

In Wisconsin, about 30 percent of all people report at least one chronic health condition, with arthritis and hypertension (high blood pressure) being the most frequently named conditions.

Table 2b. Percent of Persons Reported to Have Selected Chronic Conditions, by Age Groups

Chronic Condition	<65				65+					
	Area		Region		Area		Region		State	
	%	(+/-)	%	%	%	(+/-)	%	%	%	
Cancer	1	(1)	2	2	12	(4)	12	13	13	
Diabetes	1	(1)	2	2	10	(3)	10	11	11	
Hypertension	7	(1)	8	8	43	(6)	43	41	41	
Coronary Heart Disease	2	(1)	2	2	19	(5)	23	21	21	
Heart Attack	1	(0)	1	1	9	(3)	10	10	10	
Stroke	0	(0)	0	0	6	(3)	6	6	6	
Asthma	9	(1)	9	8	5	(2)	7	8	8	
Emphysema or Chronic Bronchitis	2	(1)	2	2	5	(3)	7	7	7	
Arthritis	8	(1)	8	7	44	(6)	44	45	45	
Any of the above	24	(2)	25	24	76	(5)	77	78	78	

Statewide, about one-fourth of all people under age 65 report at least one chronic health condition, compared with more than three-fourths of all people age 65 and over.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is based on persons who have ever been told by a doctor they have the listed condition. 95% confidence intervals are shown for the area estimates only, because they are based on smaller sample sizes than the estimates for the regions and the state (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Table 3. Actual and Expected New Cancer Cases by Site

Primary Site	Annual Average 1989-1993	1994		Significant Difference
		Actual	Expected	
Females				
Breast	266	276		
Colorectal	109	111		
Lung, Trachea & Bronchus	83	100		
Cervical	51	46		
Other Sites	318	329		
All Sites	827	862		
Males				
Colorectal	117	97		
Lung, Trachea & Bronchus	118	140		
Prostate	231	215		
Other Sites	314	346		
All Sites	780	798		
Total				
Colorectal	226	208		
Lung, Trachea & Bronchus	201	240		
Other Sites	1,180	1,212		
All Sites	1,607	1,660		

**Expected values are
not available below
the county level.**

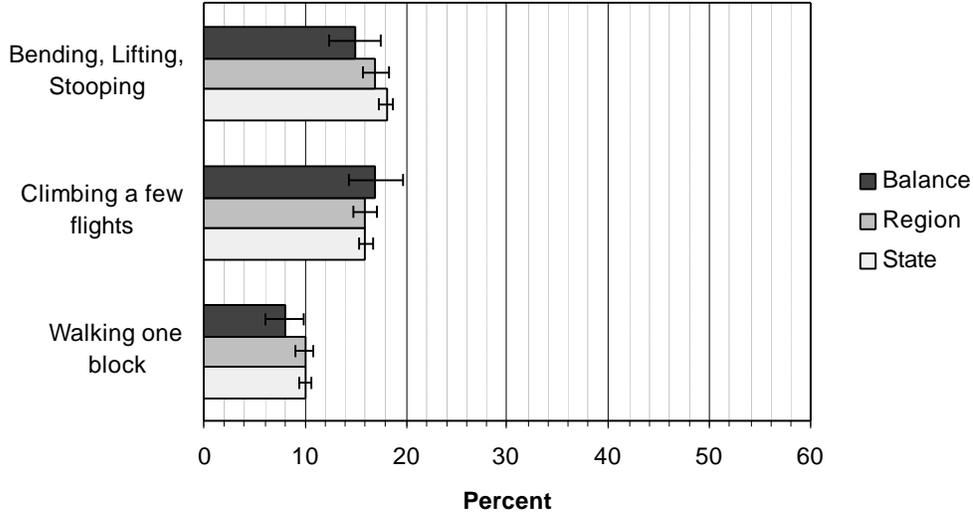
Statewide, breast cancer accounted for about one-fourth of newly reported cancers among Wisconsin women in 1994. Prostate cancer represented about 30 percent of reported cancer incidence among men.

Lung cancer and colorectal cancer each accounted for 13 percent of total cancer incidence in 1994.

Source: Wisconsin Cancer Reporting System, Center for Health Statistics.

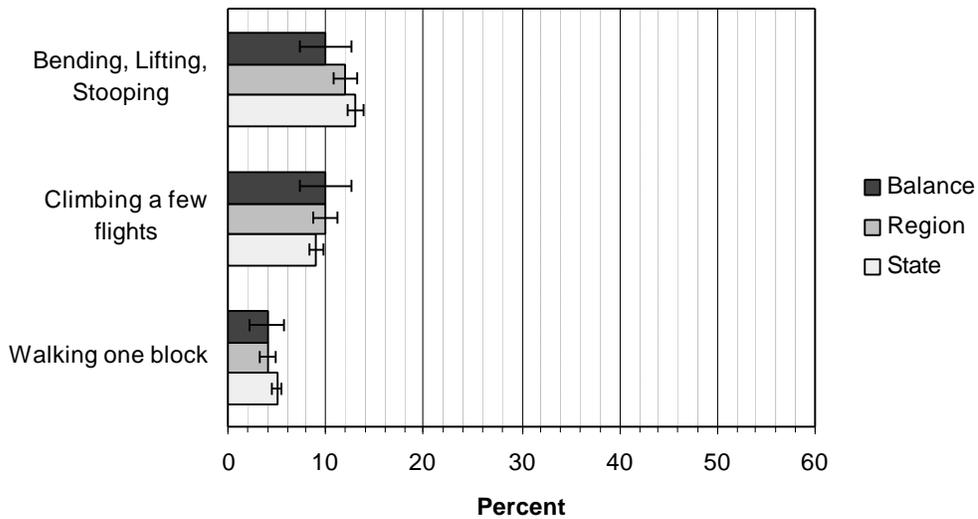
Note: The "expected" number of new cases for 1994 was calculated based on statewide cancer incidence rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of new cases in 1994 and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Figure 3a. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 45 and Older



Among all people age 45 and over in Wisconsin, a health condition limits physical bending, lifting or stooping for about 18 percent; climbing two flights of stairs for about 16 percent; and walking one block for about 10 percent.

Figure 3b. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Ages 45-64

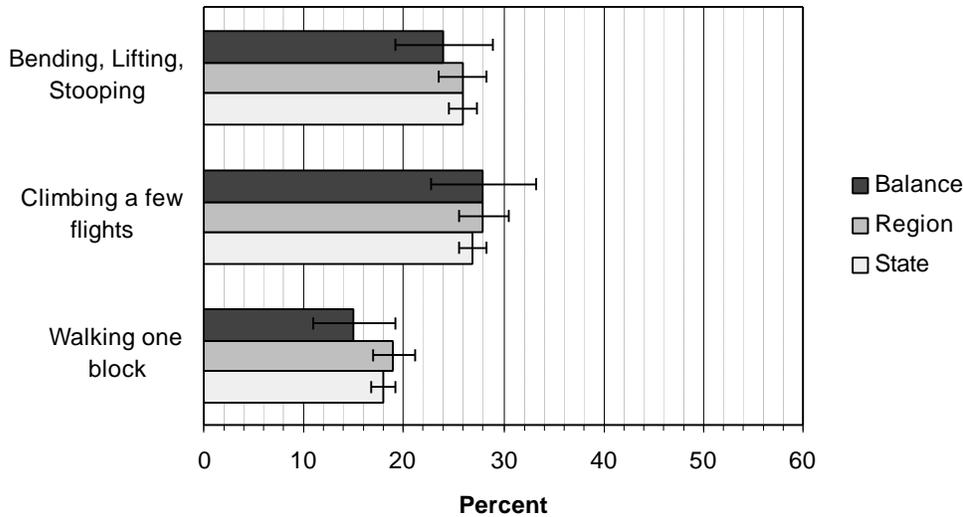


Among people ages 45-64, about 13 percent statewide indicate a limitation in bending, lifting or stooping due to a health condition.

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

Figure 3c. Percent of Persons with Reported Limitations in Physical Activity Due to a Health Condition, Age 65 and Older



Statewide, more than one-fourth of people age 65 and over face physical limitations in climbing stairs (about 27 percent) or bending, lifting, or stooping (about 26 percent).

Source: Family Health Survey, 1990-1994 combined data, Center for Health Statistics.

Note: Percent is the proportion of adults whose health limits them in performing the listed activity. Range indicated on each bar represents a 95% confidence interval (see Technical Notes). Estimates based on fewer than 100 interviews are not shown.

USE OF SERVICES

Table 4. Number of Home Health Recipients with Chronic Conditions, 1994

Age	Develop. or Phys. Disability	Mental Illness	CNS Disorder	Other Chronic Condition
<55	Data for this table are not available below the county level.			
55-64				
65-74				
75+				
Total				

A chronic condition represented the primary diagnosis for about 29,000 clients of Wisconsin home health agencies in 1994.

Source: Wisconsin Annual Survey of Home Health Agencies, Center for Health Statistics.

Note: This table provides unduplicated counts for 1994 of home health agency patients with chronic conditions; that is, patients whose primary diagnosis was a developmental or physical disability; a mental illness; a central nervous system (CNS) disorder, such as multiple sclerosis; or some other chronic condition. See Technical Notes for more detail about these categories. Counts of home health agency patients in various diagnostic categories are by *location of the agency*.

Table 5. Number of Residents of Skilled Nursing Facilities (SNFs) on December 31, 1994

Age	Develop. Disability	Mental Illness	Physical Disability	All Others
<65	20	45	6	88
65-74	19	81	6	154
75-84	6	187	19	428
85+	3	218	26	735
Total	48	531	57	1,405

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: SNFs are nursing homes licensed to provide medical care needed to restore residents to their rehabilitation potential. This table reflects an unduplicated count of all SNF residents; the count is by *location of the facility*. All SNF residents (regardless of diagnosis) are included in this table. See Technical Notes for detail about the diagnostic categories.

In 1994, about half of all residents of Wisconsin skilled nursing facilities (SNFs) were age 85 or older.

Table 6. Number of Persons Enrolled in the Community Options Program (COP) and Medicaid Waiver Programs in 1994

Age	Frail Elderly	Develop. Disability	Mental Illness	Physical Disability	Other
<18					
18-44					
45-54					
55-64	Data for this table are not available				
65-74	below the county level.				
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: This table provides unduplicated counts of all persons enrolled in the COP and Medicaid waiver programs (CIP2, COP-W, CIP1A, CIP1B, CSLA), which are state-supervised and county-administered programs that provide community-based services to nursing-home-eligible persons. The count in this table reflects *county of residence*. See Technical Notes for more detail about the diagnostic categories.

Statewide, about 18,000 people were enrolled in the Community Options Program or Medicaid waiver programs in 1994; about half the enrollees were under age 65.

Table 7. Number of Publicly-Funded Residents of Community-Based Residential Facilities (CBRFs) in 1994

Age	Develop. Disability	Mental Illness	Physical Disability	AODA	Other
18-44	Data for this table are not available below the county level.				
45-64					
65-74					
75-84					
85+					
Total					

Source: Wisconsin Human Services Reporting System.

Note: A CBRF is a home or facility where three or more adults live and receive supportive services in daily living, care, treatment, or protective services beyond room and board; CBRF services may not include nursing care on a permanent basis. This table provides unduplicated counts of persons whose residence in a CBRF in 1994 was publicly funded. (No counts of private-pay CBRF residents are available.) The count is by *resident's county of origin*. Fifty-two residents statewide were reported to be under 18 years of age, and were not included in this table. See Technical Notes for more detail about the resident categories.

Statewide, mental illness constituted the most prevalent primary diagnosis among residents with public funding in community-based residential facilities in 1994.

Table 8. Number of Residents of Facilities for the Developmentally Disabled (FDDs) on December 31, Selected Years

	1990	1992	1994
Total	Data for this table are not available below the county level.		

Source: Wisconsin Annual Survey of Nursing Homes, Center for Health Statistics.

Note: FDDs are nursing homes licensed to provide active treatment and services to residents who are developmentally disabled, primarily due to mental retardation or cerebral palsy. This table reflects an unduplicated count of all FDD residents each year on December 31; the count is by *resident's county of origin*.

Statewide, there were about 3,400 residents in facilities for the developmentally disabled in 1994, nearly 500 fewer than in 1990.

Table 9. Number of Hospitalizations for Selected Chronic Conditions, by Age, 1994

Chronic Conditions	<18	18-44	45-64	65-74	75+
AIDS/HIV	1	14	1	0	0
Cancer					
Breast	0	40	132	121	72
Colorectal	0	8	65	98	126
Lung, Trachea, & Bronchus	0	5	119	134	66
Cervical	0	14	12	5	2
Prostate	0	0	64	82	52
Other Cancers	50	472	773	617	549
Diabetes	41	170	229	166	149
Mental Illness					
Affective Disorders	248	889	351	196	189
Schizophrenias/Psychoses	9	349	139	26	33
Anxiety/Char Dis Inc Deprsn	85	132	53	38	61
Dementias	0	3	16	49	202
Alcohol and Other Drug Abuse	61	955	147	35	18
Other Mental Illness	85	45	0	0	0
Paralysis & Cerebral Palsy	0	2	4	13	10
Hypertension	0	17	21	23	30
Congestive Heart Failure	1	31	315	572	1,162
Coronary Heart Disease	0	166	1,316	1,368	1,229
Stroke	6	51	363	538	1,002
Asthma	344	228	112	59	72
Other Chronic Lung Disease	3	38	171	258	288
Liver Disease/Cirrhosis	2	44	66	39	17
Other Chronic Condition	124	910	953	886	885
Total Hospitalizations for Chronic Conditions	1,060	4,583	5,422	5,323	6,214
Total Hospitalizations	11,987	20,408	12,268	11,148	14,672

Statewide, a chronic condition constituted the primary diagnosis for about 30 percent of the approximately 602,000 total hospitalizations in 1994.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions.

Corrections to Mental Illness categories made January, 1998

Table 10. Actual and Expected Hospitalizations for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
AIDS/HIV	29	16		
Cancer				
Breast	407	365		
Colorectal	327	297		
Lung, Trachea, & Bronchus	299	324		
Cervical	35	33		
Prostate	271	198		
Other Cancers	2,691	2,461		
Diabetes	681	755		
Mental Illness				
Affective Disorders	1,607	1,873		
Schizophrenias/Psychoses	494	556	Expected values are not available below the county level.	
Anxiety/Char Dis Inc Deprsn	451	369		
Dementias	239	270		
Alcohol and Other Drug Abuse	1,085	1,216		
Other Mental Illness	153	130		
Paralysis & Cerebral Palsy	43	29		
Hypertension	83	91		
Congestive Heart Failure	1,993	2,081		
Coronary Heart Disease	4,442	4,079		
Stroke	1,821	1,960		
Asthma	844	815		
Other Chronic Lung Disease	505	758		
Liver Disease/Cirrhosis	157	168		
Other Chronic Conditions	4,033	3,758		
Total Hospitalizations for Chronic Conditions	22,689	22,602		

Coronary heart disease, congestive heart failure, stroke, cancer and chronic lung disease accounted for more than half of all 1994 Wisconsin hospitalizations for which a chronic condition constituted the primary diagnosis.

Source: Office of Health Care Information, hospital inpatient database.

Note: Data are based on the principal diagnosis only. Conditions shown tend to be associated with long-term involvement with the health care system. See Technical Notes for the ICD-9-CM codes of these conditions. The "expected" number of hospitalizations was calculated based on statewide hospitalization rates by age and sex (see Technical Notes). The last column indicates where there was a statistically significant difference between the expected number of hospitalizations and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Corrections to Mental Illness categories made January, 1998

Table 11. Hospitalizations for a Chronic Condition with a Secondary Diagnosis of Diabetes, by Principal Diagnosis, 1994

Principal Diagnosis	<55	55-74	75+	Total
Mental Illness	53	66	58	177
Coronary Heart Disease	115	500	232	847
Stroke	30	208	156	394
Chronic Lung Disease	27	55	40	122
Other Chronic Condition	208	814	476	1,498
Total	433	1,643	962	3,038

Source: Office of Health Care Information, hospital inpatient database.

Note: This table presents only those hospitalizations with a secondary diagnosis of diabetes for which the principal diagnosis was one of the selected chronic conditions examined. Diabetes is also associated with hospitalizations for complications not shown here, such as limb amputations and kidney failure.

About 14 percent of all hospitalizations for a chronic condition included a secondary diagnosis of diabetes.

Table 12. Medicaid-Reimbursed Health Services for People with Chronic Conditions, 1994

Services	Number of Recipients	Payment (in thousands)
Hospitalizations - Inpatient	1,709	\$9,883
Hospitalizations- Outpatient	3,246	1,898
Nursing Home	3,413	82,379
Physician	5,931	2,513
Pharmacy	6,348	7,128
Home Care	369	3,188
Mental Health	1,465	704
Therapies	948	1,077
Other	6,425	5,123
Total	7,242	\$114,027

Source: Medicaid Claims, Bureau of Health Care Financing.

Note: The counts in this table do not include any services provided by an HMO. "Therapies" include physical therapy, occupational therapy, speech and hearing therapy, group therapy, and comprehensive outpatient therapy provided by rehabilitation agencies. "Other" includes emergency room, durable medical equipment, lab and X-ray, dental, transportation, HealthCheck, and all other Medicaid services. See Technical Notes for list of chronic conditions and their ICD-9-CM codes.

Statewide, Medicaid paid about \$1.6 billion for services to people with chronic health conditions in 1994.

MORTALITY

Table 13. Mortality Attributed to Selected Chronic Conditions, 1994

Chronic Condition	<45	45-64	65-74	75+
HIV/AIDS	15	4	0	0
Cancer				
Breast	3	19	19	21
Colorectal	1	20	28	44
Lung, Trachea, & Bronchus	0	59	70	72
Cervical	0	1	2	1
Prostate	0	4	20	38
Diabetes	2	9	26	44
Congestive Heart Failure	0	0	6	43
Coronary Heart Disease	10	68	162	624
Stroke	4	19	26	239
Chronic Lung Disease	1	16	37	98
Liver Disease/Cirrhosis	2	13	6	5
Total (Chronic Conditions)	38	232	402	1,229
Total (All Deaths)	177	451	675	2,114

In 1994, chronic conditions accounted for about half (24,390) of all Wisconsin deaths.

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death. Several conditions may be cited on the death certificate; one is selected using criteria established by the National Center for Health Statistics as the “underlying cause of death,” that is, “the disease or injury which initiated the chain of events leading directly or indirectly to death.” See Technical Notes for ICD-9-CM codes.

Table 14. Actual and Expected Mortality for Selected Chronic Conditions

Chronic Condition	Annual Average 1989-1993	1994		
		Actual	Expected	Significant Difference
HIV/AIDS	15	19		
Cancer				
Breast	82	62		
Colorectal	93	93		
Lung, Trachea, & Bronchus	190	201		
Cervical	6	4		
Prostate	51	62		
Diabetes	78	81		
Congestive Heart Failure	59	49		
Coronary Heart Disease	919	864		
Stroke	267	288		
Chronic Lung Disease	131	152		
Liver Disease/Cirrhosis	31	26		
Total	1,921	1,901		

Expected values are not available below the county level.

Statewide, coronary heart disease represented the leading cause of death due to a chronic health condition in 1994.

Source: Resident death certificates, Center for Health Statistics.

Note: This table reflects the underlying cause of death (see note, Table 13). The “expected” number of deaths was based on statewide mortality rates by age and sex (see Technical Notes). The last column indicates whether there was a statistically significant difference between the expected number of deaths and the actual number. Two asterisks indicate significance at the .01 level and a single asterisk indicates significance at the .05 level.

Technical Notes

The regions used in this report reflect the uniform Department of Health and Family Services boundaries which became effective July 1996.

A blank column in a table and the absence of a bar in a figure indicate either that data are not available for a given geographic level, or that a stable estimate could not be calculated.

Chronic Conditions. As defined in *Chronic Disease Epidemiology and Control* (American Public Health Association, 1993), chronic conditions are those that have a prolonged course, that do not resolve spontaneously, and for which a complete cure is seldom achieved. These conditions are generally characterized by uncertain etiology, multiple risk factors, a long latency period, a prolonged course of illness, non-contagious origin, and functional impairment or disability. The conditions analyzed in this profile include the following diagnoses and their ICD-9-CM codes:

- HIV (042-044)
- Cancer (140-239)
 - Breast (174-175)
 - Cervical (180)
 - Colorectal (153-154)
 - Lung, Trachea, & Bronchus (162)
 - Prostate (185)
 - Leukemia (204-208)
 - Other (140-152, 155-161, 163-173, 176-179, 181-184, 186-203, 209-239)
- Diabetes (250)
- Mental Disorders
 - Dementias (290-290.43, 291.1, 291.2, 292.82, 292.83, 294.0, 294.1)
 - Alcohol and Other Drug Abuse (291.0, 291.3, 292.0, 292.11, 292.84, 303.90, 304-304.90, 305-305.90)
 - Schizophrenias / Psychoses (293.81, 293.82, 295.10-295.35, 295.60-295.95, 297.1-297.3)
 - Affective Disorders (293.83, 296.2-296.7)
 - Anxiety / Character and Miscellaneous Disorders (294.8, 294.9, 300.00-300.13, 301.00-301.82, 300.15-300.9, 301.84-301.9, 302.71-302.79, 306.51-307.0, 307.20, 307.21, 307.23-307.47, 307.80, 310.10, 780.52-780.54)
 - Other Chronic Mental Disorders (300.14, 301.83, 307.1, 307.50-307.51, 299.00, 299.80, 307.22, 307.23, 307.52-307.7, 312.00-312.23, 313.82, 314.00, 314.01, 315.9)
- Mental Retardation (317-319)
- Alzheimer's Disease (331.0)
- Parkinson's Disease (332)
- Multiple Sclerosis and Other Diseases of the Central Nervous System (320-330, 331.1-331.9, 333-341)
- Paralysis & Cerebral Palsy (342-344)
- Glaucoma (365)
- Cataracts (366)
- Congestive Heart Failure (428, 402.01, 402.11, 402.91)
- Hypertension (401, 402.00, 402.10, 402.90)
- Coronary Heart Disease (410-414, 429.2)
- Stroke (430-438)
- Liver Disease / Cirrhosis (571)
- Emphysema and Chronic Lung Disease (490-496, 500-504, 506, 507.8, 515-517), includes Asthma (493)
- Arthropathies, Dorsopathies, & Rheumatism (710-729), includes Arthritis (710-719)
- Osteopathies (730-739), includes Osteoporosis (733)

Family Health Survey. The Wisconsin Family Health Survey (FHS) is a statewide telephone survey using a stratified random sample of households in Wisconsin. One person in each household, who is most knowledgeable about the health of household members, answers the questions on behalf of all household members. Interviews are conducted each month of the year; a total of about 2,400 households are surveyed annually. Completed interviews are weighted to represent nonrespondents and to correct for disproportionate sampling rates across regions. The completed sample is considered to be representative of the Wisconsin household population, although it does not include any households without telephones and minority populations are somewhat underrepresented.

Confidence intervals. Figures using FHS data contain error bars at the end of each graph bar, indicating a 95% confidence interval. That is, there is a 95% chance that the actual percentage falls within the range indicated by the error bar. Tables 2a and 2b have a column labeled (+/-) that contains the 95% confidence interval associated with each county value.

Sample size. For all of the FHS analyses in this report, data from five years (1990-1994) were combined. This was done to provide more stable estimates at the county and regional levels for the age groups being considered. The confidence associated with estimates varies with the size of the sample used to produce the estimates. For example, estimates based on a sample of 200 might vary by as much as (plus or minus) 7 percent. In these profiles, FHS estimates are not available below the county level, except for the city of Milwaukee.

Behavioral Risk Factor Survey. The Wisconsin Behavioral Risk Factor Survey (BRFS) is a statewide telephone survey using a stratified random sample of households in Wisconsin. One adult is randomly selected from each household to be interviewed. Interviews are conducted each month of the year; a total of 1,500-2,100 households are surveyed annually. Completed interviews are weighted to represent nonrespondents and to correct for disproportionate sampling rates across regions. The completed sample is considered to be representative of the Wisconsin household population, although it does not include any households without telephones and minority populations are somewhat underrepresented.

Confidence intervals. See above discussion of confidence intervals.

Definition of behavioral risks. Figures 2a-2d show four health risks: (1) Sedentary lifestyle is defined by no leisure-time physical activity, or activities done for less than 20 minutes or fewer than 3 times per week. (2) Overweight is determined by a body mass index (weight in kilograms divided by height in meters squared) of 27.3 or greater for women and 27.8 or greater for men. (3) Smokers are those who smoke currently and have smoked more than 100 cigarettes in their lifetime. (4) Chronic drinkers are those who report consuming 60 or more drinks in the previous month. The Centers for Disease Control and Prevention defined these behavioral risk standards.

Sample size. Figures 2a-2d use combined data from five years of the survey to provide more stable estimates at the county and regional levels for the age groups being considered. Data from 1989-1992 and 1994 were used for sedentary lifestyle; 1990-1994 data were used for the other risks. The reader should be aware that the confidence associated with estimates varies with the size of the sample used to produce the estimates. For example, estimates based on a sample of 200 might vary by as much as (plus or minus) 7 percent. In these profiles, BRFSS estimates are not available below the county level.

Cancer Reporting System. Table 3 is based on reported cancer cases from Wisconsin hospitals and clinics, out-of-state cancer registries, and Minnesota hospitals near the state border. Data are for Wisconsin residents only.

All malignant neoplasms (except basal cell carcinoma and squamous cell carcinoma which arise in the skin) are reportable to the Wisconsin Cancer Reporting System per state statute (255.04). Only newly diagnosed cases of primary tumor sites for a particular calendar year are included in the incidence count for that year.

The colorectal cancer group includes the following sites: colon, rectum, rectosigmoid junction, anus and anal canal.

Actual and Expected Values. Tables 3, 10 and 14 present actual and expected values for cancer incidence, hospitalizations and mortality, and indicate whether the differences are statistically significant. In this profile, the statewide age- and sex-specific rates for each event (i.e., site-specific cancer incidence, cause-specific hospitalizations and cause-specific mortality) are used as the “standard” against which each community is compared. CHS calculated the sex-specific rates for each chronic condition in five-year age increments, and applied these rates to the community’s population to produce an expected number of cases in the community.

Actual values are affected by the age and sex distributions within the community. For example, because the risk of cancer increases with age, a higher than average number of cancer cases is usually found in communities whose proportion of elderly is greater than the state’s. If the community is similar to the state in terms of age and sex distribution, a higher-than-expected number of cancer cases is probably due to factors other than age and sex.

The statistical test of significance indicates the probability that the difference did not occur by chance. In any statistical test, sample size can strongly influence the results. In large communities, smaller numerical differences may be statistically significant, whereas in smaller communities, large numerical differences might not meet the statistical test of significance. For this reason, the tests of significance should not be used to compare communities. Each community should evaluate both its actual and its expected values in developing intervention priorities.

Home Health Survey. The Wisconsin Home Health Survey is an annual survey of all home health agencies providing services to Wisconsin residents. Table 4 presents the number of patients reported, based on principal diagnosis. Diagnosis categories include slightly different groupings, depending on which survey form the agency used.

Category	Conditions and ICD-9-CM Diagnostic Codes
Developmental or Physical Disability	Mental Retardation (317-319), Paralysis and Cerebral Palsy (342-344)
Mental Illness and AODA	Senile Dementia (290), Mental Illness (291-302, 306-316) and Alcohol and Other Drug Abuse (303-305)
Central Nervous System	CNS disorders (320-341) or Multiple Sclerosis only (340-341)
Other Medical Conditions	HIV/AIDS (042-044), Cancer (140-239), Diabetes (250), Stroke (436-438), Respiratory Diseases (460-519) Arthropathies, Dorsopathies, and Rheumatism (710-729) or Arthritis (710-719) Osteopathies (730-739) or Bone Degeneration (730-733)

Nursing Home Survey. The Wisconsin Annual Survey of Nursing Homes is a survey of all facilities licensed to provide nursing care in Wisconsin. Patient counts in Table 5 present skilled nursing facility residents on December 31, 1994 by principal diagnosis.

Category	Conditions and ICD-9-CM Diagnostic Codes
Developmental Disabilities	Mental Retardation (317-319), Cerebral Palsy (343) Epilepsy (345), Autism (299), other developmental disabilities
Mental Disorders	Alzheimer's (331,290.1), Mental Illness (291-302, 306-316), Alcohol and Other Drug Abuse (303-305)
Physical Disabilities	Paraplegia (344.1-344.9), Quadriplegia (344), Hemiplegia (342)
Medical Conditions	Cancer (140-239), Fractures (800-839), Cardiovascular (390-429, 439-459), Cerebrovascular (430-438), Diabetes (250), Respiratory Diseases (460-519), and other medical conditions

Human Services Reporting System. The Wisconsin Human Services Reporting System (HSRS) tracks state-funded social services administered by counties. Community Option Program and Medicaid waiver clients are classified according to program requirements, which include assigning all clients over age 65 to the “frail elderly” category, meaning a fragile state of health related to multiple age-associated conditions. All other clients and community-based residential facility (CBRF) residents are categorized by primary diagnosis as follows:

Category	Condition and HSRS Code
Developmental Disabilities	DD codes 19, 23, 25, 26, 27, 28
Mental Illness	Mentally Ill (02), Chronically Mentally Ill (03), and Severely Emotionally Disturbed (86)
Physical Disabilities	Blind/Visually Impaired (07), Hearing Impaired (08), Physically Disabled/Mobility Impaired (09), Alzheimer’s (18)*, Other Physical Disability (38)
Other	All other clients

* COP and Waiver Programs only; does not apply to CBRF residents.

CBRF counts. CBRF data are unavailable for Burnett, Eau Claire, Iowa, Milwaukee, Monroe, Portage, Washburn, and Washington counties, and residents are significantly undercounted in Barron, Brown, Forest, Kenosha, Langlade, Lincoln, Manitowoc, Marathon, Oneida, Polk, Rusk, and Vilas counties. Residents are also slightly undercounted in Buffalo, Door, Douglas, Green, Juneau, Kewaunee, Marinette, Menominee, Oconto, Ozaukee, Racine, Richland, Sauk, and St. Croix counties. Regional and statewide CBRF residents are also undercounted.

Hospitalizations. The hospital findings presented in this profile are based on data extracted from each hospital's Uniform Billing Record (UB-82 or UB-92) and submitted to the Office of Health Care Information. The categories are defined by the chronic disease diagnosis codes listed on the first page of these Technical Notes. Unless otherwise noted, hospitalizations by cause reflect the first-listed diagnosis at discharge. Table 9 is based on all hospitalizations for chronic conditions of Wisconsin residents discharged in 1994. Table 10 is based on all such discharges from 1989 to 1994.

No data were available for Wisconsin residents hospitalized in other states. Caution is therefore advised when analyzing hospitalizations for residents of border counties. The counties most affected by this care pattern are: Ashland, Barron, Bayfield, Buffalo, Burnett, Douglas, Dunn, Florence, Grant, Iron, Marinette, Pepin, Pierce, Polk, St. Croix, and Washburn. If more complete data were available, the number of hospitalizations for residents of these counties would probably be higher.

Mortality. The conditions listed in Tables 13 and 14 are defined by the chronic disease diagnosis codes listed on the first page of these Technical Notes.